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**ROYAL COMMISSION OF INQUIRY INTO CERTAIN
DEATHS AT THE HOSPITAL FOR SICK CHILDREN AND
RELATED MATTERS.**

Hearing held
8th floor
180 Dundas Street West
Toronto, Ontario

The Honourable Mr. Justice S.G.M. Grange	Commissioner
P.S.A. Lamek, Q.C.	Counsel
E.A. Cronk	Associate Counsel
Thomas Millar	Administrator

Transcript of evidence
for

19 April 1984

VOLUME 133

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1 ROYAL COMMISSION OF INQUIRY INTO CERTAIN
2 DEATHS AT THE HOSPITAL FOR SICK CHILDREN
AND RELATED MATTERS.

3 Hearing held on the 8th Floor,
4 180 Dundas Street West, Toronto,
Ontario, on Thursday, the 19th
day of April 1984.

6
7 THE HONOURABLE MR. JUSTICE S.G.M. GRANGE - Commissioner
8 THOMAS MILLAR - Administrator
9 MURRAY R. ELLIOT - Registrar

10
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22
23
24
25

(Cont'd.)...



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1

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11

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1 I N D E X o f W I T N E S S E S

2		
3	<u>Phyllis TRAYNER, Resumed</u>	577
4	Examination by Mr. Lamek (Continued)	577



1

19apr84 2 --- on commencing at 10:00 a.m.

A
EMTrc

3 PHYLLIS TRAYNER, Resumed

4 THE COMMISSIONER: As you know, we
5 are not sitting either tomorrow or Monday.

6 The question has been raised as to
7 whether we will sit next Friday, and in the ordinary
8 course we would not be sitting next Friday, but in
9 the interests of the witness, I think if there is a
10 good chance of completing the evidence on Friday, we
11 might well do that. If there is no reasonable
12 chance of completing it on Friday, we will just
13 carry on in the ordinary way and proceed to the next
14 Monday.

15 Sorry I can't help you much more
16 than that, but we will see what the position is
17 Wednesday or Thursday of next week. Obviously it
18 has been a long session already for Mrs. Trayner and
19 we would like to finish it next week if possible. But
20 we can't do that at the expense of rushing people's
21 cross-examinations.

22 Yes, Mr. Lamek.

23 MR. LAMEK: Thank you, sir.

24 EXAMINATION BY MR. LAMEK (Continued):

25 Q. Mrs. Trayner, on our travel
26 through the list of deaths we had reached I think



1

2 Charlon Gardner.

3 A. Right.

4 Q. Charlon Gardner as you may
5 recall had died at 4:25 in the morning of March 18th.
6 She was a child who was in Room 418 on your side of
7 the floor, and in order to see what the nursing
8 assignment situation was that night, the assignment
9 book discloses that you were on duty and had no
patient assignments. You were in charge of the ward.

10 Mrs. Scott was looking after Gardner
11 in Room 418 and providing shared care for that child,
plus one other. Miss Brownless had three patients
12 in Room 418 and four in Room 425, and Mrs. Christie
had four patients in Room 421, one in 423 and one in
14 426.

15 A. Yes.

16 Q. There is no indication that
17 there was anybody relieving on the floor that night.
18 It appears, therefore, that you and Mrs. Scott were
the two RNs on duty on the ward; Miss Brownless and
19 Mrs. Christie, both RNAs, were also on duty, and Mrs.
20 Scott, as I have said, was on a shared nursing care
21 assignment with Gardner and one other.

22 Now, do you have any recollection of
23 Charlon Gardner?

24

25



1

A. No.

2

3

4

Q. Would looking at the chart assist you in any way to form a recollection? I am sure you have done that in the last few weeks.

5

A. No, it doesn't.

6

7

8

Q. All right. Do you have any recollection of the shift, the long night shift of March 17 to 18?

9

A. No, I don't.

10

11

Q. Or of the arrest of that child?

12

A. No.

13

Q. Do I take it from that that you cannot tell me who relieved Mrs. Scott if Mrs. Scott took breaks that night?

14

15

A. No, I can't.

16

17

Q. We can agree, at least, if Mrs. Scott took breaks, she would have to be relieved because she was on shared nursing care?

18

19

A. That is correct.

20

21

Q. Now we know, as I have said, that you and she, you and Sui Scott, were the only RNs on duty that night.

22

23

A. Right.

24

25

Q. And I have told you earlier I



1

2 think of Miss Brownless' evidence and Mrs. Christie's
3 evidence that they had never relieved for breaks of
4 a nurse who was on shared or constant nursing care.

5

Do you recall my telling you that?

6

A. Yes.

7

Q. In the light of that evidence
and the light of the observation that you were the
only other Registered Nurse on duty and had no nursing
assignments, is it reasonable to infer that you
probably were the one who relieved Mrs. Scott that
night?

11

A. If she took a break, yes.

12

Q. Yes. And indeed Miss
Brownless (and this is at Volume 116, Mr. Commissioner,
page 6270), beginning at line 8 was asked by Miss
Cronk, and I am reading this to you in the hope that
it may either jog your memory or help you to be of a
little more assistance to me on the likelihood of
your having relieved Mrs. Scott:

18

"Q. Did you at any time that night..."

19

This is to Miss Brownless.

20

"...while you were in Room 418 taking
care of your three patients observe
any nurse in that room other than Sui
Scott?"

24

25



1

2 "A. Other than Sui Scott?"

3

"Q. Yes."

4

"A. Phyllis Trayner."

5

"Q. Can you tell me please when
you saw Mrs. Trayner in Charlon
Gardner's room?"

6

"A. Well, I can't recall what
times. It was just before Charlon
Gardner took a turn, Sui Scott wasn't
in the room, I was in the room doing
something with one of my children.
I can't recall if I was finishing
feeding or vital signs, and Charlon
Gardner's monitor started dropping
and Phyllis turned to me, she was
tending to the other child that Sui
was looking after, and said, go get
Sui, and I left the room to get her
and she came back in the room, and
that's all I can recall."

7

8

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"Q. Was it shortly after that
episode that Charlon Gardner went into
arrest?"

"A. That's correct."

If Miss Brownless' evidence or



1

2 recollection be correct, does that suggest also,
3 Mrs. Trayner, that you were in there looking after
4 Scott's patient - she said you were tending to the
5 other one and Sui Scott was not in the room because
6 you had to send Brownless to get her?

7

A. That is correct.

8

Q. Can we reasonably infer from
9 that that you were relieving Sui Scott?

10

A. I don't know if we can assume
11 that I was relieving her. I may have been on rounds
12 and checking the other baby.

13

Q. But to the extent that you have
14 told me that one could reasonably infer from the
15 fact that you were the only other Registered Nurse
16 on the floor that one, you were relieving Scott if
17 she took breaks, does Brownless' recollection assist
18 us in establishing that as a likelihood in your view?

19

A. Well, it is a likelihood, yes.

20

Q. Yes. Okay. And we know from
21 the chart, and Mr. Commissioner, that is on page 57,
22 that the child got into trouble with the apex dropping
23 at 3:35 in the morning. And whether you were doing
24 rounds and Scott was out of the room or whether you
25 were in fact relieving her, Miss Brownless' recol-
 lection is you were there and Scott was not shortly



1

2 before 3:35 in the morning. Right?

3 Now fairly I have to say to you also
4 that Mrs. Scott doesn't recall who relieved her that
5 night. She was confident that she took breaks, but
6 she couldn't recall who relieved her, but said it was
7 probably you because she could not recall having been
8 relieved by an RNA for breaks when she was on shared
and constant nursing care.

9 I take it that you have no recollection
10 as to whether you gave any medications to the
11 child, Charlton Gardner, on the night that she died?

12 A. No, I don't.

13 Q. Or recorded any vital signs
or anything of that sort?

14 A. I looked through the flow
15 sheets. I didn't recognize any of my writing.

16 Q. It appears that on the night
17 of the 17th (this is at page 102 of the chart, Mr.
18 Commissioner) on the medications sheet - sorry, 102 --

19 A. On this one?

20 Q. It appears, does it not, that
Mrs. Scott signed for the nine o'clock digoxin dose?

21 A. Right.

22 Q. And for the nine o'clock
23 aldactazide dose?

24

25



1

A. Right.

2

Q. And there was no other
medication to be given that night?

3

A. Right.

4

Q. And your name doesn't appear
on the medications sheet?

5

A. Right.

6

Q. And if we look at page 118,
which is the flow sheet, the sign-off signature, if
you will, is that of Mrs. Scott?

7

A. Right.

8

Q. Are you able from the vital
signs that are recorded there to help me as to whether
any of them appears to be in your writing? Do you
recognize your writing?

9

A. No, not there.

10

Q. All right. So there is
nothing in the chart that assists us in knowing
whether you relieved the child at the time when the
vital signs had to be taken in any event?

11

A. Right.

12

Q. And I take it, therefore,
we have exhausted your recollection as far as Charlton
Gardner is concerned?

13

A. Right.

14

15



1

2 Q. All right. We won't dwell
3 longer on Charlton Gardner but move on to the night
4 that Allana Miller died.

5

Could we have the chart, please,

6

Mr. Registrar?

7

Again just to recite the facts of
the death, Mrs. Trayner, Allana Miller died at 3:27
in the morning of March 21st.

9

A. Right.

10

Q. She was in Room 423 and we
have heard that is the room with a single bed.

11

A. Right.

12

Q. She was alone in that room.

13

No other patients with her.

14

A. Right.

15

Q. Okay. Again to set the
assignments that night you were in charge of the ward.

17

A. Right.

18

Q. And at the beginning of the
shift had a patient in Room 418 and one in Room 426,
but the notation in the assignment book is "till 2300
only".

21

A. Yes.

22

Q. Do you recall that your
patient assignment ended at 2300?

24

25



1

2 A. Yes. We had called Janet
3 Brownless back.

4 Q. She came in -- she was on
5 relief until eleven o'clock, was she?

6 A. Right.

7 Q. But was to come back to 4A
8 at 11:00 and at that point she was to take over your
9 nursing assignment plus a couple of other children?

10 A. Right.

11 Q. Was that because you were
12 expecting the admission of Justin Cook that night?

13 A. That is correct.

14 Q. He was expected at about
15 eleven o'clock?

16 A. 10:30, yes.

17 Q. All right, 10:30 to 11:00.
18 So Miss Brownless was going to come back and help
19 because the admission of a child occupies nursing
20 time I take it?

21 A. That he was a sick infant at
22 the time. It was an emergency.

23
24
25



Bmcb+jc

B

1

2

Q. So, until 11 o'clock at night you had those two patient assignments, Miss Nelles was in charge of Allana Miller in Room 423 and she also until 11 o'clock at night had a couple of patients in 418. Mrs. Christie had three children in 425, two in 421 and until 11 o'clock one in 418?

7

A. Right.

8

Q. And then Miss Brownless, who was relieving until 11 o'clock, was to come on at 11 and stay for the rest of the shift and was to take over three children in 418 and one in 426?

12

A. Right.

13

Q. Now, can we start at the beginning of that shift, please. Your team had been off duty for a couple of days, had it not?

15

A. Right.

16

Q. Indeed, if we look at the WIN sheet for that week, and again I am using the version that Mr. Roland doesn't approve of but I think it accurate in this respect, it shows for the week of March 16th to 22 that your team had worked the long night on Tuesday the 17th.

21

A. Yes.

22

Q. And then had been off entirely on the 18th and 19th of March and came back on duty

24

25



B.2

1

2 on the evening of Friday the 20th?

3

A. Right.

4

Q. All right. Now, you will
remember that Kevin Pacsai had died on the 12th of
5 March?

6

A. Yes.

7

Q. When you came on duty on the
evening of the 20th do you recall any reference to
9 or discussion of Kevin Pacsai?

10

A. Yes, I do.

11

Q. Can you tell me how that arose?

12

A. Susan Nelles was on the floor
at that time just after report was taken.

13

Q. Yes.

14

A. And had told us at the back of
the nursing station, there was myself, Bertha Bell,
that's all I can remember being there at that time,
and Sue had told us that Liz Radojewski had called
her earlier in the week and had told her that there
would be a coroner's inquest into Baby Pacsai and
that he had a high digoxin level and she told us that
the level she was told was 25.

21

THE COMMISSIONER: 85?

22

THE WITNESS: 25

23

THE COMMISSIONER: 25.

24

25



B.3

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THE WITNESS: She also said that

Mrs. Radojewski had told her to write down everything that she could remember about Baby Pacsai because she would probably be called to give evidence on that baby. I can remember that's about as far as it went at that time.

MR. LAMEK: Q. But is it your

recollection that on that occasion you learned from Miss Nelles of her information that the Pacsai level had been 25?

A. Right.

Q. Was there any discussion among you of that digoxin level when you first heard it?

A. I think the discussion was '25, are you sure'. There was a further discussion later at the back of the nursing station with a couple of the doctors.

Q. Yes.

A. And it was felt that there had to be a mistake, that it could not have been 25 and that it was more likely to be 2.5.

Q. Do you recall who those doctors were?

A. Dr. Nelles and Dr. Paul Runge.

Q. I take it you were present at that conversation?



B.4

1

A. Yes.

2

Q. Was Miss Nelles also present?

3

A. This was our first coffee break,
we had sat down at 10:15.

4

5

Q. Do you recall whether any other
nurses were present at that time?

6

A. Bertha.

7

Q. Yes.

8

A. I can't remember if Janet
Brownless was down at that time for a coffee break or
not.

9

Q. And was it the consensus that
25 must be an error and the real level must be 2.5,
there had been a decimal point misplaced?

10

11

A. That was the feeling, that we
had never heard of a level of 25 and the only level
that we had ever heard of was greater than 5 and that
was with Janice Estrella.

12

Q. Right.

13

A. And nobody really knew at that
time how much greater than 5 it was, it was just
greater than 5 and it was surprising to find out that
they came up with a level of 25.

14

Q. Yes.

15

A. So, it was assumed that they

16

17

18

19

20

21

22

23

24

25



B.5

1

2 made a mistake and the decimal point should have
3 been at 2.5.

4 Q. Was it your understanding that
5 the inquest was to be held because of Pacsai's high
6 digoxin level?

7 A. I understood that the father
8 was extremely angry.

9 Q. Yes.

10 A. Had wanted to know why the baby
11 had died.

12 Q. Yes.

13 A. And that they were going to
14 have the inquest to find the reasons.

15 Q. Was it your understanding that
16 the digoxin level which was reported to you and which
17 you discussed was one of the reasons for having an
18 inquest?

19 A. Yes.

20 Q. Now, if as you thought the level
21 must be 2.5 and not 25, did you regard that as a
22 sufficiently high level to cause concern and have an
23 inquest?

24 A. Well, I was under the impression
25 that a level over 2 was high with our children. I
also believe though that Mr. Pacsai was extremely



B.6

1

2 upset and that was the basis for calling the inquest.

3 Q. All right. Did you at a
4 subsequent time learn that the level was indeed 25?

5 A. Yes.

6 Q. When did you learn that?

7 A. From the police and I think
8 that's after Susan Nelles' arrest.

9 Q. Not until after certainly 24th
10 of March?

11 A. Right.

12 Q. All right. And in recounting
13 this tale of Nurse Radojewski's call to you, how was
14 Miss Nelles, was she --

15 THE COMMISSIONER: Call to - I'm sorry?

16 THE WITNESS: To Susan.

17 MR. LAMEK: Q. In recounting to you
18 the story of Mrs. Radojewski's call to her, how was
19 Miss Nelles, was she calm, was she concerned about
20 the inquest. How was she, what was your impression?

21 A. She was angry that Mrs. Radojewski
22 had bothered her on her time off to tell her about
23 the inquest. Just that it was her time off and I
24 don't think Sue actually regarded it as being
25 extremely important that it couldn't have waited
until Liz could have seen her face to face and told
her.



B.7

1

2

3

Q. She had been the nurse in charge
of Pacsai the night that he died?

4

A. Right.

5

6

7

Q. Did she express any concern
about a high dig. level on that occasion, I mean, on
the Thursday evening in either of the two conversations
on Thursday - on Friday evening, I'm sorry?

8

9

10

11

A. That if it was a high level
and the baby had come from McMaster Hospital that
maybe the high level came from McMaster because he
was a query dig. toxicity from there.

12

13

14

Q. Did she at that time, that is
to say, on the Friday evening, make any comment about
the digoxin which she had administered to him
according to the orders on his chart?

15

16

17

18

19

20

21

A. No, not that I can recall.

22

23

24

25

Q. All right. During the first

part of that shift -- One other question, I'm sorry,
about the Pacsai matter. As we have said, your
team had not been on duty for the couple of days
preceding Friday the 20th when you came on in the
evening?

A. Right.

Q. When you came on shift in the

evening of Friday did you learn that Dr. Fowler in



B.8

1

2 the course of Wednesday the 18th and perhaps Thursday
3 the 19th, had been making any sort of investigation
4 or inquiry on the floor about digoxin?

5 A. No, I wasn't.

6 Q. All right. Did you subsequently
7 learn that Dr. Fowler had made such inquiries or
investigations?

8 A. Only that you told me.

9 Q. Okay, but not until then?

10 A. No.

11 Q. Okay. Now, let's take the
12 period until 10:30 because, as I understand it, it was
13 about 10:30 that Cook arrived to be admitted to the
ward.

14 A. Right.

15 Q. From the beginning of the shift
16 until 10:30 you have a recollection of seeing Allana
17 Miller?

18 A. No, not at that time, no.

19 Q. I take it however you must have
20 seen her when you did your rounds?

21 A. Right.

22 Q. As team leader you would visit
23 all the patients in the course of the shift on a
regular basis, as you have told us?

24

25



B.9

1

2

3

4

A. Yes. I can recall talking to Susan about Allana Miller during that evening before 10:30.

5

6

Q. Do you recall what information you were getting as to Allana Miller's condition?

7

8

9

A. I think she just told me what her heart rate was, she told me that she had given her some apple juice and that she had settled her for sleep.

10

THE COMMISSIONER: I'm sorry, what?

11

12

THE WITNESS: She had given her some apple juice.

13

THE COMMISSIONER: Yes, but what had she done to her sleep?

14

THE WITNESS: Settled her.

15

THE COMMISSIONER: Settled her.

16

17

18

19

MR. LAMEK: Q. And as you recall it had she prior to Cook's arrival on the ward said anything to you that indicated concern about Miller's condition?

20

A. No.

21

Q. All right. I think you referred to a coffee break that you and Miss Nelles had when Dr. Nelles and Dr. Paul Runge were present. When did that occur?

22

A. Susan and I sat down about 10:15.

23

24

25



C
DM/cr

1

2 Q. At the nursing station?

3

4 A. At the nursing station, back of
the nursing station.

5

6 Q. Yes. Were Doctors Nelles and

Runge also present?

7

A. Yes.

8

9 Q. Was that the first time, so
far as you are aware, that Miss Nelles had sat down
that shift to have a bit of a break and a cup of
coffee?

10

A. Yes.

11

Q. And the first time you had?

12

13 A. Yes. We both decided at that
time because we were expecting Justin Cook to arrive
shortly.

14

Q. And how long were the two of
you there?

15

16 A. We were there for about 15
minutes when Justin Cook arrived on the floor.

17

18 Q. And having the discussion
19 that you told me about about the Pacsai digoxin level?

20

A. Yes.

21

22 Q. Was there any other discussion
23 about any of the children on the ward during that
24 conversation that you can now recall?

25



1

A. No.

2

Q. Or any of the deaths that had
3 occurred on the ward?

4

A. No.

5

Q. And then what happened?

6

A. Justin Cook arrived and both
7 Susan and I had left the back of the nursing station
8 to meet the parents, and we took Justin and the
9 parents to Room 418.

10

Q. Now, did Cook arrive with both
parents?

11

A. I thought he did, yes, yes,
he did and we sent the father downstairs to admit
13 him.

14

Q. Had they brought him directly
to the floor?

15

A. Yes.

16

Q. And they hadn't gone to the
18 Admitting Department at all then?

19

A. No, they were told not to by
Dr. Fowler, to bring Justin Cook right up to the
20 floor.

21

Q. So your recollection is that
22 both parents arrived with the child at what, at about
23 10:30?

24

25



1

A. Yes.

2

Q. And you sent the father down
3 to the Admitting Department so the child might be
4 admitted to the Hospital?

5

A. Yes.

6

Q. Did the mother stay on the
7 floor?

8

A. Yes.

9

Q. And was the child taken with
10 his mother into Room 418?

11

A. Yes.

12

Q. And did you and Miss Nelles
13 go into Room 418?

14

A. Yes, we did.

15

Q. Miss Nelles was to admit the
16 child to the ward as I understand it?

17

A. Yes.

18

Q. Were any physicians present
19 at that time?

20

A. Dr. Soulioti, she was either
21 there at the bedside when Justin Cook came in, or
22 was just coming, and Dr. Michael Schaffer came
23 shortly after that as well.

24

Q. And so at about 10:30 we have
25 in addition to the people who had previously been



1

2 in Room 418, we have Justin Cook and his mother, you
3 and Miss Nelles, and either Dr. Soulioti then or very
4 shortly afterwards, and Dr. Schaffer I think you said?

5 A. Right.

6 Q. And the process of admitting
7 Cook went forward I take it?

8 A. Yes.

9 Q. What were you doing there?

10 A. I was just getting things
11 ready for Susan, a thermometer, getting the oxygen
12 ready. I brought her in some diapers and a flow
13 sheet so she could write down everything, a tape
14 measure to measure the baby's length.

15 Q. All of that information has to
16 be recorded at the time of the admission I take it?

17 A. Right.

18 Q. How long does the admission
19 process of a child to the ward usually take?

20 A. Including speaking to the
21 parents?

22 Q. Yes.

23 A. It could take upwards to about
24 an hour.

25 Q. And the purpose of speaking to
the parents as I understand it is to obtain what you



1

call a nursing history from them?

2

A. Right.

3

Q. And am I correct that on this occasion the conversation with the parents to obtain a nursing history did not take place?

4

A. Not that evening.

5

Q. And we will come to the reason for that in a little while. Did Miss Nelles, having done her thing, vital signs, measurements and all the rest of that, then assist the physicians in doing what they had to do?

6

A. I had, Dr. Nelles was still out at the desk.

7

Q. Yes.

8

A. And in between getting the things for Susan I had gone out to go back and finish up my coffee. It was around 11 o'clock that night that I came back and I said, "Your brother is still at the desk, do you want to finish your coffee, I can finish settling Justin Cook", and she said "Fine" and had gone out and had a few more minutes with her brother.

9

Q. Were the physicians still there at that time?

10

A. Dr. Michael Schaffer was there,

11

12



1

6 2 and Dr. Soulioti, and they were examining the baby.

3

4 Q. And was that something for which
they did not need Miss Nelles' assistance, or did

5 you fill in for her?

6

7 A. I filled in, I just kept the
baby quiet.

8

9 Q. Was the mother still there at
that time?

10

A. Yes.

11

12 Q. So you say Miss Nelles was out
for a few minutes, apparently finishing her coffee,
as far as you understood anyway?

13

A. Yes.

14

15 Q. And that was at about 11
o'clock?

16

A. Right.

17

18 Q. What time did she return?

19

A. About 11:15, 11:20.

20

21 Q. At that stage were the same
people still in the room at Cook's bed?

22

A. Yes.

23

24 Q. That is to say the two
physicians, Soulioti and Schaffer, and yourself,
and the mother?

25

A. Dr. Soulioti had left the room



1

2 about 11:15, she was making notes at the back of the
3 nursing station.

4 Q. Yes.

5 A. And Michael Schaffer has just
6 sat down to talk to the parents, and I think he was
7 sitting down in Room 418 with them and talking to
them about Justin.

8 Q. At that point which is now I
9 take it about 11:15, 11:20, something of that sort,
10 at that point had the examination of Cook been
11 completed?

12 A. The initial examination, yes.

13 Q. What more was to come?

14 A. They were going to do an
15 ECG on the baby and they were going to take Justin
16 Cook over to the echo lab.

17 Q. The ECG had not yet been done?

18 A. We were getting ready to do
it as Dr. Schaffer was talking to the parents.

19 Q. And when Miss Nelles came back
20 to the room, you told us about 11:15, or 11:20, did
21 you stay in the room with her?

22 A. I think so, yes.

23 Q. Perhaps you can tell me how
24 it was that no nursing history was ever obtained from
25



Trayner, ex.
(Lamek)

1

2 the parents, that night anyway.

3 A. As Michael Schaffer had spoken
4 to the parents, he then took them outside to the
5 nursing desk and got them to sign a consent form,
6 and I thought it to be for a cardiac catheratization.

7 Q. Yes.

8 A. And Sue was in and out, just
9 picking up things for Justin, and she was doing little
10 things on the floor and I was in the room, I knew
11 that Mike Schaffer had had the parents outside. When
12 Michael Schaffer came in to do the ECG, the
13 electrocardiogram Sue had just followed him. I
14 said, "Are the parents still outside?" And Michael
15 said, "No, I sent them home". I said, "You're not
16 supposed to send them home". So I asked Sue did she
17 see them and she said they were walking down the hall,
18 they had left. So Susan and I had both spoken to
19 Mike Schaffer that we needed a nursing history from
the parents and he should not have sent them home at
that time.

20 Q. So you were unable to get your
history that night because the parents left?

21 A. Right.

22 Q. Now, while all this is going
on, we have forgotten, although I am sure and Miss

23

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Nelles had not, Allana Miller there alone in Room 423, what was happening to her all this time? We have now taken up I take it about an hour, from 10:30 when Cook arrived, indeed we have taken up close to one hour and a quarter, from the time the two of you went out for your coffee break until now I would take it about 11:30?

A. Right.

Q. What was happening with Allana Miller, did you know?

A. No, I didn't know.

Q. Did you have any -- did you at any time hear her monitor alarm go off in the period that you have just described to us?

A. No, I didn't.

Q. And there did not appear, I take it, any cause for you to be concerned to go in to see how she was doing?

A. No, there wasn't.

Q. And then what happened? We are now at about 11:30 I take it and the parents have been sent home, leaving you without a nursing history.

A. Right.

Q. And you are preparing for the ECG?



10

A. Yes, the ECG was done.

1

2

Q. Was that a portable ECG unit
3 that was brought into the room?

4

A. Yes.

5

Q. Were you present when the ECG
6 was done?

7

A. I had hooked the leads up on
8 Justin.

9

Q. Yes.

10

A. I don't know, I can't recall
11 being there the whole time, I may have gone out.

12

Q. To the best of your information
13 and recollection was Miss Nelles there throughout
14 that time?

15

A. I can't recall.

16

Q. This was to be her patient I
take it?

17

A. Yes.

18

Q. Would it be reasonable to
19 expect that she would be there during that period
when the ECG was being done, assisting the physician?

20

A. If it was needed, yes.

21

Q. And how long did it take to do
22 the ECG?

23

A. Ten minutes, 15 minutes.

24

25



Trayner, ex.
(Lamek)

1

2 Q. So we are now at about 11:40,

3

11:45, something of that sort?

4

A. Right.

5

6

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EMT.jc
D 1

2 Q. Now could we turn to the chart
3 for a moment, please, and first to the flow sheet
4 which is on page 36. We are now looking at Allana
5 Miller's chart and the flow sheet. The vital signs
6 for that shift begin on the bottom three lines of
7 the previous page, and from those it appears, does
8 it not, that on each occasion, 8 p.m., 9 p.m. and
9 10 p.m. Allana Miller had had a slow heart rate and
10 apparently an irregular one. Do you understand the
11 "I" to mean irregular?

12 A. Yes.

13 Q. And a heart rate so much slower
14 than she had during the day although during the day
15 on a number of occasions it had been relatively slow
16 for a child of her age I take it?

17 A. Yes.

18 Q. All right. And then if we turn
19 to page 36 it appears at 2300 there was a heart rate
20 of 61, and here the letters "IR". Does that also
21 mean irregular as you understand it?

22 A. Yes.

23 Q. And then a heart rate taken at
24 2345. We have heard from Miss Nelles, and is it your
25 understanding that she recorded that heart rate at
 quarter to twelve?



D.2

1

2 A. Yes.

3 Q. Do you know who did the heart
4 rate at 2300?

5 A. I did.

6 Q. I rather suspected that someone
7 other than Miss Nelles had because it seemed to be
8 her practice to use the single letter "I" to indicate
irregular. *~*

9 A. Hm-hum.

10 Q. And you did the 11 p.m.?

11 A. Right.

12 Q. Heart rate. At 11 p.m. --

13 A. At the time I have there.

14 Q. Or within a few minutes either
side of 11 o'clock?

15 A. Right.

16 Q. Do you recall what had taken
you into Allana Miller's room at 11 p.m.?

17 A. I can't recall. I knew that
Allana Miller was on an hourly apex.

18 Q. All right.

19 A. And I may have gone in or Sue
may have asked me to check Allana.

20 Q. You can't recall if there was
anything like an alarm going off on a monitor that

21

22

23

24

25



D.3

1

2 caused you to go in and see how she was?

3 A. No.

4 Q. Now if you look at page 38 of
5 the chart, Mrs. Trayner, you will see that something
6 else is also recorded as having happened at 11 p.m.,
7 and that is that Miss Nelles signed for an
administration of ampicillin?

8 A. Right.

9 Q. Were you aware that she had
10 administered the ampicillin at 11 o'clock when you
11 went to do the vital signs at about the same time
12 or the apex at about the same time?

13 A. No.

14 Q. All right. Is it your information
15 that Miss Nelles did indeed do the ampicillin
16 that she signed for?

17 A. Yes.

18 Q. That is not one that you
administered?

19 A. No.

20 Q. All right. Or to your knowledge
anyone other than Miss Nelles?

21 A. No.

22 Q. So now we have got Allana Miller,
she has had her apical rate recorded at 11 p.m. or

23

24

25



D.4

1

2 thereabouts by you?

3 A. Yes.

4 Q. She has received her ampicillin
5 at 11 o'clock or thereabouts from Miss Nelles?

6 A. Right.

7 Q. And Miss Nelles has apparently
8 recorded her apical rate at 11:45?

9 A. Right.

10 Q. And so far as we know, so far
11 as I understand your evidence, Allana Miller although
12 her heart rate is slow and irregular is not giving
any unusual cause for concern?

13 A. Right.

14 Q. Now let's go back to Cook in
15 Room 418. When we last left Cook - and it's
beginning to sound like an episode thing - the ECG
had just been completed I take it?

16 A. Right.

17 Q. And was he now to go to the echo
18 lab?

19 A. Right.

20 Q. Who took him?

21 A. Susan Nelles.

22 Q. Do you know what time she took him?

23 A. About a quarter to twelve.

24

25



D.5

1

2 Q. Did you see her take him down
3 the hall to the echo lab?

4 A. I handed Justin Cook to her to
5 take over to the echo lab.

6 Q. All right. Were you holding him
7 prior to his going off to the echo lab?

8 A. They had just completed the ECG.

9 Q. Yes.

10 A. And I was taking off the leads
11 on four limbs and cleaning up the gook that is there.

12 Q. Yes.

13 A. And Susan had come in and said
14 they are ready for him over at the echo lab and I
15 said fine. We had put a nightie on him and I handed
16 Susan Justin Cook to take over.

17 Q. All right. Was the ECG performed
18 with Cook in his crib or out of his crib?

19 A. It was in his crib.

20 Q. And you had taken him out of
21 the crib I take it then to remove the - what are they
22 called, the electrodes?

23 A. Yes, but I wouldn't have taken
24 him out of the crib. He would have been laying on the
25 bed.

Q. Okay. So you removed the



D.6

1

2 electrodes, cleaned up what you called the gook.

3 A. Yes.

4 Q. And then took him out of the
5 crib to hand him to Miss Nelles?

6 A. I was on one side of the crib
7 and she was on the other side.

8 Q. Yes.

9 A. So I had just finished cleaning
10 up his arms and his legs and I handed Justin over to
Susan.

11 Q. All right. Do you recall
12 whether she carried him down to the echo lab or
13 whether she took him in the crib?

14 A. To the best of my knowledge I
remember handing Justin over to Susan to take over.
15 I remember cleaning up his bedside area after he had
16 left and cleaning up the leads from the ECG,
17 straightening up the bed and his bedside table.

18 Q. All right. I take it from that
19 you would infer she carried him down to the echo lab
in her arms?

20 A. Yes.

21 Q. All right. Prior to leaving for
22 the echo lab with Justin Cook did Miss Nelles have
23 any conversation with you about her other patient

24

25



D.7

1

2 that night, that is to say Allana Miller?

3

A. Yes.

4

Q. What was that?

5

A. She had told me that she had just done Allana Miller's apex at about a quarter to. She had told me that there was an IV, an IV antibiotic that was running through, and that it should be finished within a few minutes and if I could keep an ear for the buzzer or for the alarm. She also told me that she had to give another medication. She didn't know what medication it was or what time it was to be given, and if I could check that for her.

12

Q. All right. Did you subsequently hear the Ivac buzzer go on the IV in Allana Miller's room?

15

A. Yes.

16

Q. And that would indicate that the material in the buretrol had now passed through or essentially all passed through?

19

A. Right.

20

Q. What time was that?

21

THE COMMISSIONER: Is there a buzzer that indicates --

22

THE WITNESS: It is on an Ivac machine and when there is no fluid left in the buretrol or

23

24

25



D.8

1

2 the cylinder then a buzzer would go off to let you
3 know.

4 THE COMMISSIONER: What's the problem?
5 Is it dangerous if the --

6 THE WITNESS: There is a safety valve
7 in the cylinder that will fall down to not allow air
8 into it, but there will be no fluid in and the
9 machine will keep pumping into the patient so you
have to put fluid into the cylinder.

10 THE COMMISSIONER: I take it it does
11 some harm to the child?

12 THE WITNESS: It would, yes.

13 THE COMMISSIONER: If the machine
continued to pump and there is no fluid?

14 THE WITNESS: Right.

15 MR. LAMEK: Q. And I take it when you
hear the buzzer you know it is time now to go and
flush the IV and then to restart a flow of material
if that is the order?

16 A. Yes.

17 Q. And I am sorry, I think I asked
you about what time you heard the buzzer sound but I
don't recall either whether you answered or if you
did what your answer was?

18 A. I thought it to be around

19

20



D.9

1

2 midnight when I was in the room.

3 Q. All right. And did you flush
4 the IV at that time?

5 A. Yes, I did.

6 Q. Now we have got what looks like
7 a floor plan of the floor and Room 423 is along
8 towards the left hand side of this floor plan, is it
9 not?

10 A. Right.

11 Q. That is a single room where
12 Allana Miller was?

13 A. Yes.

14 Q. Can you give me some indication,
15 please, where her bed was that night? She was the
16 only child in the room.

17 A. This is the corridor?

18 Q. This is the corridor, yes.

19 A. Her bed would be here, the head
20 by this wall.

21 Q. All right. You are telling me
22 that her bed was running parallel to the window?

23 A. Right.

24 Q. With the head against the right
25 hand wall as we are looking at the floor plan?

26 A. Yes.



D.10

1

2 Q. All right.

3 A. And the feet would be there.

4 Q. And on which side of the bed
5 was the IV pole?

6 A. She had a bedside table that
was beside the bed here.

7 Q. Between the bed and the door?

8 A. Right.

9 Q. Yes.

10 A. And an Ivac that was about here
11 beside the bedside table.

12 Q. All right. So between the door
13 and the bed were a bedside table and the IV pole and
the Ivac?

14 A. Right.

15 Q. All right.

16 A. And a monitor was there somewhere.

17 Q. And the monitor was on the same
18 side also?

19 A. Yes.

20 Q. Thank you. So I take it then in
21 going to the IV to flush it you were standing on the
door side of Allana Miller's bed?

22 A. Right.

23 Q. You were between the bed and the
24 door?

25



D.11

1

A. Right. Or beside the bed.

2

Q. You were beside the bed but on
the door side of the bed if I can put it that way?

3

A. Okay. Right.

4

Q. Not on the window side of the bed?

5

A. No.

6

Q. In the position in which you were
standing if someone were standing in the doorway of
Room 423 would they see your back or your side or
what would they see when you were working at the IV?

7

A. Probably my side.

8

Q. Your left side?

9

A. Yes.

10

Q. Thank you. While you were
flushing the IV as you have told me, and I will come
back to the detail of that in a moment, were you aware
of anybody standing in the doorway?

11

A. No.

12

Q. Can you tell me how you flushed
Allana Miller's IV at about midnight?

13

A. I released some fluid from the
IV bag, from the little clamp that was up there and
filled up the buretrol to the amount of fluid that I
had wanted; turned off the clamp and I may have
increased the IV flow, I am not sure.

14

15



D.12

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Q. Now, Mrs. Trayner, as you were doing that, you were doing something that the Reporter can't record. Do I put it fairly that as you have described what you did you were holding your right hand up approximately level with the top of your head to indicate with that hand you were releasing fluid from the IV bag?

A. Right.

Q. And at the same time you were holding your left hand out at about chest height, and I take it you were what, holding the buretrol?

A. Holding the buretrol so that I could see the numbers.

Q. All right. And if I may say so you made those gestures in the way that one would make them if one were accustomed to doing them over and over again. Is that the way you normally flush an IV?

A. Right.

Q. Have you ever to your recollection flushed an IV with the use of a syringe?

A. No, not for the purpose of an IV medication, no.

Q. All right. And you are clear in your recollection that you did not do so on the night of March 20 to 21 at midnight?



D.13

1

2 A. That's right.

3 Q. Your recollection is clear that
4 on that occasion with the gestures that you have just
5 demonstrated for us you released IV fluid from the
6 bag above the buretrol, that the fluid flowed into
7 the buretrol which I take it you were steadyng with
8 your left hand?

9 A. Right.

10 Q. Do you recall how much fluid
11 you released?

12 A. No. Today I can't, no.

13 Q. All right. What would be an
14 amount that you would normally use to flush an IV line?

15 A. As long as a child wasn't on a
16 fluid restriction. There could be 20, 30, 40 cc's.

17 Q. All right. You might use less I
18 take it?

19 A. If it was on a - you would have
20 to use at least 10 cc's because that is the amount
21 from the tubing to the child.

22 Q. That makes sense. So you would
23 need at least 10 cc's of IV fluid going through the
24 line effectively to flush it?

25 A. Right.

Q. Do you recall, Mrs. Trayner,



D.14

1

2 whether on that occasion, that is to say at midnight,
3 March 20 to 21, when you were flushing that IV line,
4 whether you had a syringe with you?

5 A. No.

6 Q. Can you think of any reason --

7 THE COMMISSIONER: Sorry, that answer
8 was no, I don't remember or no, I didn't have one?

9 THE WITNESS: I can't recall having one.

10 MR. LAMEK: Q. All right. Can you
11 think of any reason for your having had a syringe
12 with you at the time of flushing an IV line?

13 A. No.

14 Q. And indeed if your hands were
15 in the position that you demonstrated in doing the
16 things that you have told us about, I would take it
17 that a syringe would be an encumbrance to you?

18 A. Right.

19 Q. It would be an awkward thing to
20 hold while you were performing the operation that you
21 have described to us, would it not?

22 A. Yes.

23 Q. Do you recall any occasion on the
24 night of March 20-21 when you were at or near the IV
25 line of Allana Miller when you did have a syringe with
you?



D.15

1

2

A. Yes.

3

Q. When was that?

4

A. 1 o'clock.

5

Q. We will come to that later, but

6

can you just tell us at the moment what you were doing?

7

A. I was giving an IV medication.

8

Q. Is that the gentamicin?

9

A. Yes.

10

11

12

13

14

-

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16

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25



A. No.

Q. As you are aware, Mrs. Bell
has given evidence that at some point that night,
she said initially at about midnight, and fairly
subsequently she said she couldn't be absolutely
certain that it was midnight, she saw you at the IV
of Allana Miller with a syringe. If I understand
your evidence, do I have it correctly that if she did
that, it could only have been at about one o'clock
when you were administering gentamicin?

A. Right.

Q. And it could not have been at midnight when you were flushing the IV line?

A. No.

Q. We will come back to that in
the context then of the gentamicin administration.

A. Okay.

Q. Could we backtrack for just a moment, Mrs. Trayner, to the time that Miss Nelles went out to complete that coffee break with her

24

25



Trayner
ex. (Lamek)

1

E2 2 brother and Dr. Runge.

A. Yes.

Q. I thought you told me a few
4 minutes ago that that was about eleven o'clock.
5

A. Yes.

Q. Could it have been as late
7 as 11:15, 11:20 that she went out?

A. It could have been, yes.

Q. All right. And if it were
9 then the fifteen or twenty minutes that you have
10 suggested she was away, it would take her to 11:30
11 or to 11:40?

A. Right.

Q. Yes. Do you recall on an
13 earlier occasion, and I am referring now to a state-
14 ment given by you on April 21, 1981 saying that it
15 was about 11:20 that she went off for her break?
16

A. It could have been.

Q. All right. If indeed you
18 said at that time that she went off to have that
19 coffee at about 11:20, I take it your evidence today
20 would not contradict that, essentially?

A. Right.

Q. Some time around 11:15, 11:20?

A. Right.

24

25



Trayner
ex. (Lamek)

1

E3 2 Q. Okay. What time did Miss
3 Nelles come back from the echo lab with Justin Cook?

4 A. I thought it was just shortly
5 after 12:15, 12:20 because I remember her asking me
6 if anyone had taken her vital signs for her on her
other patients.

7 Q. All right.

8 A. So, it had to be shortly
9 after her midnight vital signs, so about 12:15, 12:20.

10 Q. When you were in Allana
11 Miller's room at about midnight flushing that IV, how
12 was the child?

13 A. She was sleeping and I did
14 her vital signs at that time and there wasn't anything
15 that was of a great concern to me.

16 THE COMMISSIONER: I take it that is
17 your writing for the vital signs at twelve o'clock?

18 THE WITNESS: Right, yes.

19 MR. LAMEK: Q. The 2400 vital
20 signs on page 36 are yours?

21 A. Yes.

22 Q. I notice on that occasion
23 you just used an 'i' to indicate 'irregular', I take
24 it?

25 A. Yes.



1

E4 2 Q. All right. Do you sometimes
3 use 'i' and sometimes 'ir' for that purpose?

4

A. Yes, I guess I do. I never
5 noticed.

6

Q. At eleven o'clock you apparently
7 said, 'ir' for 'irregular', at midnight it was 'i'
but the meaning is the same?

8

A. Yes.

9

Q. Just looking at that page 36
10 for a moment, Mrs. Trayner, we know then that the
11 2300 apical rate was the one that you recorded.

12

A. Yes.

13

Q. 2345 was Miss Nelles.

14

A. Right.

15

Q. 2400 was yours.

16

A. Yes.

17

Q. What about 0100?

18

A. That looks like my writing

as well.

19

Q. That's your writing as well,
is it?

20

A. Yes.

21

Q. All right. And then there is
22 a blood pressure noted with no time on the very next
23 line. Is that your writing?

24

25



Trayner
ex. (Lamek)

1

E5 2 A. No, it's not.
3 Q. Do you recognize that hand-
4 writing?

5 A. Yes.

6 Q. Whose is it?

7 A. Mrs. Christie's.

8 Q. All right. Do you know in
fact whether Mrs. Christie did take the blood pressure
9 of Allana Miller some time after one o'clock?

10 A. I can remember Mrs. Christie
11 being in the room when the alarm had gone off.

12 Q. Yes.

13 A. I can remember me standing
14 at the desk, at the nursing desk, and Mrs. Christie
15 had come out and I had asked her what the problem
16 was and she said that the heart rate was - I can't
17 remember what the heart rate was but she said, I've
done the blood pressure, and she told me what it was.

18 Q. All right. Do you recall
19 at about midnight that night having any conversation
anywhere with Bertha Bell?

20 A. No. We had a conversation
21 earlier, that would have been at 10:15 when we took
22 our break.

23 Q. Yes. Is that the one you have

24

25



E6 1 told me about when Drs. Nelles and Runge were there?

2 A. Right.

3 Q. All right. But other than
4 that do you recall talking to Bertha Bell again that
5 night up to around midnight?

6 A. No.

7 Q. All right. So, we have now
8 got Allana Miller at least through until midnight
9 still with the slow heart rate and it is still
10 irregular but there is no apparent change in the
11 condition, is that fair?

12 A. Right.

13 Q. Right. And that some time
14 about 12:15, 12:20, according to your recollection,
15 we have Miss Nelles back from the echo lab with
16 Justin Cook?

17 A. Right.

18 Q. All right. Where did Miss
19 Nelles go when she came back from the echo lab?

20 A. Into 418.

21 Q. All right. Did she stay in
22 Room 418?

23 A. I can remember her putting
24 Justin Cook into oxygen.

25 Q. Yes.



1
E7 A. And I can remember her getting
2 a bottle to feed him.
3

4 Q. To the best of your knowledge,
5 Mrs. Trayner, from the time that Susan Nelles took
6 Justin Cook to the echo lab at or shortly after
7 11:45, when was she next in Room 423?

8 A. When Allana Miller got into
9 difficulty.

10 Q. And that was some time after
11 two o'clock in the morning?

12 A. Yes.

13 Q. To your knowledge she was
14 not present in Room 423 between about a quarter to
15 twelve and some time after two in the morning?

16 A. Right.

17 Q. All right. We know as far as
18 your movements are concerned what had happened until
19 midnight. When were you next in Allana Miller's
20 room?

21 A. I went in just shortly before
22 one, one o'clock, and took Allana's heart rate and
23 gave the medication.

24 Q. All right. And that was the
25 gentamicin?

THE COMMISSIONER: I'm sorry, is that



Trayner
ex. (Lamek)

1

E8 2 the heart rate?

3 MR. LAMEK: That's the 62 recorded
4 at 0100.

5 A. Yes.

6 Q. All right. Now, other than
7 the need first to take the hourly apex rate and
8 second to give the gentamicin which was due at one
9 o'clock, was there anything in Allana Miller's
10 condition that caused you to go in at about that time?
11 Was there any alarm from the monitor? Was there any
sign of distress or anything of that sort?

12 A. No.

13 Q. All right. Well, let's get
14 to that gentamicin. I think you told us that before
15 she took Cook off to the echo lab Miss Nelles said
16 she had another medication to give and she wasn't
too sure when it was due. Was that your evidence?

17 A. Yes.

18 THE COMMISSIONER: I thought she
19 said she didn't know what it was or when, is that
right?

20 MR. LAMEK: Okay. But she knew she
21 had another medication to give.

22 A. Yes.

23 Q. Did she at any time prior to
24
25



1

E9 2 your going into Room 423 with the gentamicin ask you
3 to administer that medication for her?

4 A. She didn't ask me that at
5 that time.

6 Q. All right. Did she subse-
7 quently?

8 A. I don't know.

9 Q. How did it come about that
10 you did administer the gentamicin at or about one
o'clock?

11 A. I had the medication ticket
12 that I was taking all the tickets away from the
medication room to check all the orders and I knew
13 that --

14 Q. Forgive me, let me interrupt
15 you for a moment, if I may. Is that part of your
16 normal duties as team leader --

17 A. Yes.

18 Q. -- to check the medication
19 tickets from time to time during the course of a
shift?

20 A. It's done every night, yes.

21 Q. Okay. Thank you. So, that's
22 what you were doing? About what time was that?

23 A. I think I may have taken them

24

25



1

E10 2 down about 12:30 and was just getting organized to
3 get the nightly work done.

4

Q. Were you doing that at the
5 desk at the nursing station?

6

A. I would have, yes.

7

Q. All right. I'm sorry, I
8 interrupted you. Would you go on, please.

9

A. And I knew in the little slot
there was a one o'clock ticket and it was Allana
10 Miller's gentamicin. I had the ticket, Sue was I
11 can remember being busy trying to settle Justin,
12 feeding him and he was very irritable and he was
13 crying. So, I don't know if I told her that gent.
14 was due, if I went in and said the gentamicin is
15 due and said I will give it for you if you want,
I don't know.

16

Q. All right. But you did in
17 fact administer that medication at about one o'clock
18 to Allana Miller?

19

A. Yes.

20

Q. Now, before doing it, did you
check at all with Miss Nelles? Did you check the
21 medication with Miss Nelles?

22

A. Yes.

23

Q. What did you do?

24

25



1
2 Ell A. I brought in the medication
3 ticket, I brought in a syringe and I brought in the
4 vial of gentamicin.

5 Q. Let me ask first, why did you
6 do that?

7 A. I wanted to impress upon
8 Susan that the drug that she knew she had to give
9 but didn't know what it was and when, that this was
10 the gentamicin that I have for one o'clock for Allana
11 Miller and I'll give it for you now. I was afraid
12 that since I had all the medication tickets out at
13 my desk, Sue could have looked at her little crib
14 sheets that we make all the medication treatments out
15 and had thought, well, oh, yes, I have the gentamcin
16 to give to Allana Miller and may have gone and given
17 it. I just wanted to impress upon her that this is
18 the drug, I'm going, that there wouldn't be any
19 confusion as to whether it was given or not given.

20 Q. Why did you not merely tell
21 her, I am going to do it or I have done it, to avoid
22 any possible duplication of the administration? Why
23 did you take the drug in to her to show her?

24 A. I guess if she saw the drug
25 then it would make more sense to her that, yes, the
drug was given and, like, she has actually seen me with



1

E12 2 it and if I told her, with her being that busy that
3 night, it may have slipped her mind.

4 Q. All right. Now, you say you
5 went into the room, you had the medication ticket,
6 you had a syringe and you had the vial?

7 A. Right.

8 Q. Do you recall whether you had
9 already drawn up the medication prior to going into
Room 418 to show Miss Nelles?

10 A. No, I can't remember.

11 Q. All right. I can tell you,
12 Mrs. Trayner, that Miss Nelles' evidence - and it is
13 found, sir, at Volume 124, page 8250 - when you went
14 into 418, the medication had already been drawn up into
15 the syringe and you brought with you a loaded syringe
16 and the empty vial of gentamicin. You have no
17 recollection of when or where you drew up the genta-
micin?

18 A. No.

19 Q. If Miss Nelles' evidence be
20 correct, can you tell me what was the point of showing
her an empty vial?

21 A. Just to show her that I was
22 giving gentamicin. I wasn't sure if Allana Miller had
23 any other medications due that night, I hadn't gone

24

25



Trayner
ex. (Lamek)

1

E13 2 through all the tickets.

3

Q. Yes.

4

A. And she may have had another antibiotic needed or another medication that was due. I was giving this one o'clock gentamicin and I just wanted to impress that this was what I was giving at this time. Now, if there was another drug to be given at two or three, then Sue would know, well, she would have to give it.

10

11

12

13

14

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Q. Well, are you telling me then that you did not take the vial in for the purpose of showing her that you were indeed giving gentamicin but rather to impress upon her that she didn't have to worry about the gentamicin administration. Do you see the distinction that I am drawing?

A. No, I wanted to let her know about the gentamicin. Gentamicin comes in two different strengths.

Q. Yes.

A. It comes in 20 mg. per ml. and then the next one is the adult one, which is 80 mg., and I just wanted to be double sure that she saw that there was the 20 mg., and I got the dose and that's what we were giving.

Q. Okay. Believe me, I am not



1
E14 2 suggesting anything inappropriate, but does it not
3 occur to you, Mrs. Trayner, that all you were really
4 doing was showing her an empty vial that had apparently
5 at some time contained gentamicin in the strength
called for on the order?

6 A. You see, I can't recall if
7 I drew it up at the bedside with Sue, the gentamicin,
8 or I drew it up in the medications room.

9 Q. You have no recollection, but
10 she did. If her recollection be correct, it is fair,
11 is it not, that she could have no absolute guarantee
12 of what was in the syringe?

13 A. Okay, yes.

14 Q. She had no reason to doubt you
of course.

15 A. Right.

16 Q. But she couldn't know by you
showing her the empty vial, could she?

17 A. If it was empty, yes.

18 Q. Yes. Did you have any other
reason for taking that medication into Room 418 to
19 show Miss Nelles or was it just so she would know that
20 she didn't have to worry about that medication, it was
21 now going to be given by you and there wouldn't be a
22 duplication?

23

24

25



1

E15 2 A. That was the main reason.

3

Q. Was there any other reason?

4

A. We also heard about the

5

Pacsai inquest that night.

6

Q. Yes.

7

A. And although it wasn't a big thing, I just wanted to let her know that I was going ahead to give this medication.

9

10

—

11

12

13

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16

17

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19

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21

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24

25



DM. jc
F

1

2 Q. And that is what you did?

3 A. Yes.

4 Q. What was the - can we look at the
5 med sheet at page 38 of the chart; the order apparently
6 called for gentamicin, 10 milligrams IV. Can you tell
7 me what volume of material 10 milligrams of gentamicin
would fill?

8 A. Gentamicin has to be diluted
9 1 milligram per cc, so it would have to be at least
10 10 cc's.

11 Q. That is in the IV?

12 A. In the buretrol.

13 Q. In the buretrol?

14 A. Yes.

15 Q. But when you draw that up into
16 a syringe what volume of material do you have for
17 10 milligrams?

18 A. I would have had .5.

19 Q. .5 of a cc?

20 A. Yes.

21 Q. Do you recall what size syringe
22 you used when you drew up the gentamicin?

23 A. No, I don't.

24 Q. To draw up half a cubic centimetre
25 of a medication, what size would you normally use?



F.2

1

2 A. We would have used tuberculin
3 syringes, or we could have used 3 cc syringes.

4 Q. The tuberculin syringe is the
5 1 cc size?

6 A. Yes.

7 Q. Is it fair to say that for half
8 a cubic centimetre you are more likely to use a
9 1 cc than a 3 cc size, is that fair? 3 cc is six times
bigger than you needed.

10 A. Yes, but the tuberculin syringes
11 were basically used for digoxin.

12 Q. Yes.

13 A. For drawing that up so that we
14 could, we would be able to squirt the medication into
the baby's mouth.

15 Q. I am sorry, I am not quite sure
16 how that bears on the question that I asked you?

17 A. We would use more of the
18 tuberculin syringes for digoxin.

19 Q. Yes.

20 A. If we had other - more, or an
21 abundance of TB syringes we would have used a tuberculin
22 syringe at night.

23 Q. I am sorry, let me understand you.
24 You say the tuberculin syringe is a 1 cc size, that

25



F. 3

1

2 was the one that you normally used to administer the
3 oral digoxin?

4 A. Right.

5 Q. Because that is drawn up in very
6 small volumes, is it not?

7 A. Right.

8 Q. And the 1 cc is the smallest
9 syringe you had on the floor, wasn't it?

10 A. Right.

11 Q. Therefore I take it the 1 cc
12 syringe was frequently used on the cardiology floor
for digoxin?

13 A. Yes.

14 Q. If for nothing else?

15 A. Right.

16 Q. Was that the most frequently used
17 sized syringe on the floor?

18 A. No, 3 cc's came in a close second.

19 Q. And I take it 3 cc's would be
20 used for generally speaking, and if you had a choice,
21 they would be used for obviously material that
22 occupied more than 1 cc of syringe space, you can't
23 get more than 1 cc into a tuberculin syringe?

24 A. Right.

25 Q. I take it generally you use the



F. 4

1

2 smallest size available that will accommodate the
3 material that you are going to use?

4 A. Yes.

5 Q. That you are going to administer?

6 A. Yes.

7 Q. And therefore, may I take it
8 that normally you would expect to draw up a half cc
9 of gentamicin into a 1 cc syringe, is that fair,
normally that is what you would expect to do?

10 A. Yes.

11 Q. Do you have any reason for
12 thinking that is not what you did on the night of
13 March 20th to 21?

14 A. No, unless there was a shortage
15 of the 1 cc syringes.

16 Q. Do you have any recollection of
17 there having been a shortage?

18 A. No, not that night. I do recall
19 other nights where we were short on TB syringes and
we had to use one syringe to draw up all the digoxin.

20 Q. Again I have to be clear as to
21 your answer, Mrs. Trayner. Are you telling me you
22 don't recall whether you were short that night; or
you recall that you were not short that night of the
23 1 cc size?

24

25



F.5

1

2

A. I don't recall if we were short
that night.

4

Q. You don't recall whether you
were short or not that night?

6

A. Right.

7

Q. Now, let me be absolutely plain
about it, Mrs. Trayner, you recall giving evidence at
the preliminary hearing?

9

A. Yes.

10

Q. And in Volume 4, Mr. Commissioner,
at page 693, you were asked by Mr. McGee, at line 25
in respect of the gentamicin administration:

13

"What size was that syringe that you
used to do that?"

14

And you said:

15

"I think it was a 3 cc syringe."

16

It doesn't appear that Mr. McGee
asked you anything like the series of questions that
I have asked you about the size. Do you now recall
any basis for your thought then that what you used
was a 3 cc syringe? I don't ask you to speculate, do
you now recall why you may have thought then, that is
to say at the preliminary hearing, that the syringe
you used was a 3 cc syringe?

23

A. I may not have known at the time

24

25



F. 6

1

2

when Mr. McGee asked me how much gentamicin was to be given.

4

5

Q. In other words, had the dose been a bigger dose you might have had to use a 3 cc syringe?

6

7

A. Yes.

Q. You cannot now say, oh yes, that is what made me say that at that particular time, you can't tell us?

10

A. No.

11

12

Q. But certainly you did say back in the spring of 1982 that you thought it was a 3 cc syringe. You cannot now tell me whether to your recollection there was a shortage of the 1 cc size that night, the size you would normally have used for this sized dose?

16

A. Right.

17

18

Q. When you were administering that medication at 1 o'clock, or thereabouts, were you aware of anybody in the doorway of the room, or in the entrance way of the room at all?

21

A. No.

22

Q. Were you in the same position to administer the gentamicin as you have described for the flushing of the IV?

24

25



F. 7

1

A. Standing?

2

Q. Yes.

3

A. Yes, but my hand would not have
been up at the IV.

4

Q. I take it on this occasion you
would have had one hand on the buretrol?

5

A. Yes.

6

Q. And the other with the syringe
at the medication port at the top of the buretrol?

7

A. Right.

8

Q. Standing in the position that you
now recall, can you tell me whether your hands would
have been visible to someone in the doorway?

9

A. Yes, they would have been.

10

Q. And on that occasion you were
using a syringe, the size you cannot now recall, to
inject gentamicin into the buretrol?

11

A. Right.

12

Q. Which I take it is the normal
way of administering gentamicin?

13

A. Yes.

14

MR. LAMEK: Mr. Commissioner, is this
a convenient time to break?

15

THE COMMISSIONER: Yes, we will take
20 minutes.

16

--- Short recess

17



F. 8

1

2 --- Upon resuming:

THE COMMISSIONER: Yes, Mr. Lamek.

MR. LAMEK: Thank you, Mr. Commissioner.

Q. Mrs. Trayner, just going back to
5 a couple of things where we have already dealt with,
6 and going back briefly. At or about 11 o'clock we
7 know that two things happened with respect to Allana
8 Miller; one you took and recorded the apical rate?

9 A. Right.

10 Q. And two, Miss Nelles administered
11 the ampicillin?

A. Right.

13 Q. And I take it you were not there
at the same time doing those things?

A. No. _____

15 Q. Have you any idea which came
16 first?

17 A. No, but I would assume that I
18 had taken the apical rate first because Sue knew she
19 was on an hourly apex so when she was in giving the
20 gentamicin she would have taken it, or the ampicillin.

Q. That makes sense. So the probability is that you were there first, took the apex and recorded it, and because she was on an hourly apical rate would that sheet be kept in the room by her bedside?

25



F. 9

1

2 A. Yes.

3 Q. And therefore if Miss Nelles
4 followed you later into that room, and you having
5 then left, to do the ampicillin, she would see from
6 the sheet that the 11 o'clock apex had already been
done?

7 A. Right.

8 Q. Were you aware when you went
9 in to do the 11 o'clock apex that Allana Miller had
10 a medication due at 11?

11 A. No.

12 Q. And you had not looked at the
13 medication ticket prior to that time to see what the
child needed?

14 A. No, I had not.

15 Q. With respect to the administration
16 of gentamicin at about 1 o'clock, were you alone with
17 the child in that room when you were administering
18 the gentamicin?

19 A. Yes.

20 Q. There was no one else there at
that time?

21 A. Not that I can recall, no.

22 Q. I have already asked you whether
you recall seeing anyone in the doorway and you said

23

24

25



F.10

1

2 no, you did not; and there was nobody in the room
3 with you as you can now recall it?

4 A. No.

5 Q. Do you recall whether you had
6 any conversation anywhere on the floor with Bertha Bell
7 at or about 1 o'clock that night?

8 A. No.

9 Q. You say, no, you can't recall;
or no, you didn't?

10 A. No, I can't recall.

11 Q. And just one thing on the
12 geography of the room if you can help me. You told
13 me that the bed was parallel to the window and towards
14 the window end of the room I take it?

15 A. Yes.

16 Q. With the head on the wall to
the right as we look at this chart?

17 A. Yes.

18 Q. On the door side of the bed you
have told me there was a night stand and the IV setup?

19 A. Yes.

20 Q. Was the IV a sort of normal IV
pole?

21 A. Yes.

22 Q. With a bag at the top and the

23

24

25



F.11

1

buretrol and so on?

3

A. It would be on the Ivac, so there
would be a machine in the middle of the pole.

5

Q. And working from window to door
now, we have got the bed and then what is next, the
IV or the night stand, or the bedside stand?

7

A. Well, it would be the night stand
beside her.

9

Q. Yes.

10

A. And the IV pole would be in the
centre of the bedside table and right down the middle
of it.

12

Q. And behind it, against the wall?

14

A. No, in front of it.

15

Q. All right. So we have got the
bed, and then next to the bed a night stand, and sort
of in front of the night stand then the IV pole?

17

A. Right.

18

Q. Now we are at 1 o'clock in the
morning, and as you have told us to the best of your
knowledge Miss Nelles has not seen the child now
since quarter to twelve, or thereabouts?

21

A. To the best of my knowledge.

22

Q. Let me be sure, I may not have
asked you this very clearly. Was it at about quarter

24

25



F.12

1

2 to twelve, or a few minutes thereafter that Miss
3 Nelles had taken Cook down to the echo lab?

4 A. Yes.

5 Q. As far as you know, by 1 o'clock
6 she still had not been in to see Allana Miller again?

7 A. To the best of my knowledge.

8 Q. And by 1 o'clock do I take it
9 that Allana Miller had not yet shown any signs of
change in her condition?

10 A. No.

11 Q. After you had administered the
12 gentamicin at about 1 o'clock in the morning, when
13 were you next in Room 423?

14 A. It was just shortly after
15 1 o'clock then.

16 Q. And how did that come about?

17 A. Allana's monitor kept buzzing.

18 Q. Kept buzzing?

19 A. Well it buzzed at that time, then
a few minutes later it would buzz again.

20 Q. And did you go in the first time
it buzzed?

21 A. I think so, yes.

22 Q. Did you go in each time it buzzed?

23 A. No.

24

25



F.13

1

2

Q. Did somebody go each time the
alarm buzzed?

4

A. Yes.

5

Q. And was that the first occasion
that you can recall that night when the alarm on the
monitor had sounded, a little after 1 o'clock?

7

A. Yes.

8

Q. You think you responded to the
first alarm call from the monitor?

10

A. Yes.

11

Q. What did you find?

12

A. I can't recall what I found, I
took her heart rate.

13

Q. Yes.

14

A. And that would have been it, I
think the chart --

16

Q. Did you record it? Let's look
at page 36 first of all, certainly on the flow sheet
there doesn't seem to be anything recorded between
1 o'clock and 1:45?

20

A. Hm-mm. I could have just
listened to her heart rate when the monitor had gone
off, you may not necessarily have to write it down
into the flow sheet.

23

Q. Now we know both from the flow

24

25



F.14

1

2

3

4

sheet on page 36 and from the nursing note on page 42
that at approximately 1:45 the heart rate dropped
about 54 and was very irregular.

5

A. Hm- mm.

6

Q. Is the 1:45 entry on the flow
sheet in your writing?

7

A. Yes.

8

9

10

11

Q. And is it your recollection that
at some time between 1 o'clock and 1:45 you had been
in the room in response to the alarm on the monitor
going off?

12

A. Yes.

13

Q. Do you recall how frequently the
monitor alarm sounded between 1 and 1:45?

14

A. I would estimate about three
times, three or four times.

16

17

Q. On the 1:45 occasion was that
also an occasion when the monitor alarm went off?

18

A. Yes.

19

20

Q. And was that then the fourth or
fifth time that that had occurred since 1 o'clock?

21

A. I think so, yes.

22

23

24

Q. To how many of those earlier
alarms, the three or four that occurred before 1:45,
to how many of those had you responded, how many times
had you gone into the room?

25



G
EMT/cr

1

A. I had gone in the first time
it had sounded.

2

Q. Yes.

3

A. And I can't recall if I had
gone in after that. I was on my way to the room
a couple of times, but Janet Brownless or Mrs.
Christie had beat me there to it.

4

Q. All right. You have told us
that on one occasion Mrs. Christie had answered and
had taken the blood pressure and recorded it and you
talked to her about that at the nursing station?

5

A. Yes.

6

Q. Now on these three or four
occasions whatever it may have been between shortly
after 1 o'clock and 1:45 did you at any time talk to
Susan Nelles in 418?

7

A. Yes.

8

Q. About Allana Miller's alarm
going off?

9

A. Yes, I had.

10

Q. What the problems were?

11

A. Yes.

12

Q. Do you remember whether you
spoke to her on more than one occasion in that time
period? One or more than one time?

13

14



1

2 A. Well, I think I told her -

3 I had given her the vital signs for midnight I know,
4 and I had told her at 1 o'clock shortly after I had re-
5 turned when the alarm had gone off again that Allana's
6 apex was either irregular or it was slower than before.

7 Q. Yes.

8 A. I can't recall how many times
I told her. I kept her up to date with the baby.

9 THE COMMISSIONER: Sorry, you had what?

10 THE WITNESS: Kept her up to date.

11 MR. LAMEK: Q. Did she appear to be
12 concerned that the irregularity and the rate was now
13 at a point where the alarm on the monitor was
sounding?

14 A. She said it had been low before,
15 that she hadn't seen the apex before that or she
16 hadn't listened to the apex, so I told her that I
17 will ask Dr. Soulioti who was still at the desk to
have a look at her or listen to her heart rate
18 before she left for the night.

19 Q. And did you do that?

20 A. Yes.

21 Q. Did Dr. Soulioti take a look
22 at the child?

23 A. Not at that time, no, she

24

25



1

2 didn't.

3 Q. All right. Did she give any
4 reason for not complying with your request?

5 A. It wasn't an urgent request.
6 I had just asked her to check in on Allana before
7 she had left the floor.

8 Q. All right.

9 A. And she would do that as soon
10 as she had finished up writing Justin Cook's chart.

11 Q. All right. And before she
12 left the floor did she look at the child?

13 A. Yes.

14 Q. And did she write any orders,
15 give you any instructions with respect to the child?

16 A. I thought she had written an
17 order that night when I had spoken to her to hold
18 digoxin for the morning.

19 Q. The orders are found
20 beginning on page 28. 8:30 in the evening apparently
21 Dr. Kantak had ordered a dig. level for the following
22 morning and had also ordered that dig. be held. Do
23 you see that on page 29?

24 A. Yes. Do you have writing on
25 page 30?

Q. I think you will find those



1 /rc
2 G4

3 orders - they are very poorly reproduced - at page
4 43. Certainly there is an order of Dr. Soulioti at
5 0230 showing 'hold digoxin'.
6

7 A. Right.
8

9 Q. And I confess I am a little
10 puzzled as to why that is there in light of the 8:30
11 order of Kantak to hold the digoxin. But it is your
12 recollection that order was written anyway about
13 2:30 in the morning after Dr. Soulioti had taken a
14 look at the child?
15

16 A. Dr. Kantak I think wrote his
17 order, though, on the 19th.
18

19 Q. I'm sure you are right. You
20 are absolutely right. That was the day before and
21 there was a dig. level that morning. So Dr. Soulioti
22 took a look at the child at 2:30 in the morning and
23 wrote an order to hold digoxin.
24

25 A. I don't believe she had
seen the baby at that time. I told her what Allana's
heart rate was, and that it was in the 50s --
26

27 Q. Yes.
28

29 A. -- and it was irregular. And
30 that was her order then, to hold the digoxin and they
31 would probably do a dig. level in the morning --
32

33 Q. All right.
34

35



G5

1

A. -- and that she would check
the baby as soon as she had finished her order.

2

Q. On that subject, Mrs. Trayner,
if you look at page 38, you will see that Miss Nelles
signed for the digoxin dose at 9:00 p.m. on the 20th,
did she not?

3

A. That's correct.

4

Q. Do you recall any discussion
with her prior to her administering that dose?

5

A. No.

6

Q. All right. Now we have had
then Allana Miller's monitor alarm going off three or
four times between one o'clock and 1:45, and that
at least was a new departure that night, was it not?

7

A. Yes.

8

Q. Was it a development that
caused you concern?

9

A. It was a concern because her
heart rate was a little lower --

10

Q. Yes.

11

A. -- than I had remembered it
to be when I had taken the signs at eleven and at
midnight.

12

Q. Yes.

13

A. In looking over the flow

14

15



G6 1 sheets in the room, she hadn't been as low as 50
2 I don't think.

3 Q. All right. When you spoke to
4 Dr. Soulioti I think you told me a couple of minutes
5 ago it wasn't an emergency call - go and look at that
6 child right now?

7 A. No, it wasn't.

8 Q. And I take it from that,
9 although you had a concern about the heart rate which
10 was now dropping lower than it had been, you didn't
11 regard it as an emergency situation?

12 A. No.

13 Q. Just for them to keep an eye
14 on it, I take it?

15 A. Yes, and just for Soulioti
16 to look at the baby before she had left.

17 Q. Now in the periods between
18 the alarm going off, as it did between 1:00 and 1:45,
was the child left alone?

19 A. Was the child left alone?

20 Q. Yes.

21 A. Yes.

22 Q. Okay. You were relying I take
23 it on the monitor reasonably to alert you if there was
another incident of the heart rate dropping?

24

25



1

G7

A. Yes.

3

4

5

6

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Ω. So you did not perceive it

again to be so urgent a situation that someone should have been there looking at the child all the time and keep that close an eye on her?

A. No.

Ω. Then at 1:45, as we know,

the heart rate is recorded by you, and at that stage it is 54. Do you think that to have been the occasion when you asked Dr. Soulioti to take a look at the child?

A. It could have been, yes.

Ω. Could you carry us through

then the next little while on Allana Miller's progress and course?

A. I don't -- I can't remember the times, but I can give you what I can remember.

Ω. Good. Thank you.

A. I can remember that the alarm went off another time. This is after we spoke to Dr. Soulioti, and at this time Bertha was on her way into the room to check the alarm. And I had followed Bertha in. She was -- Allana was kind of gagging and choking a little bit

Ω. Yes.



G8

1

A. And we had sat her up in the bed. She had vomited a small amount, which we thought was the apple juice that had been given earlier. Bertha had suggested that we suction her maybe, but when we went for the suction catheters, there was none in the little basket that we keep them in. I can also remember --

8

9

10

Q. Sorry, where is that basket kept?

11

12

13

14

15

16

A. It would be on the wall to the window.

Q. In the room?

A. Yes.

Q. Okay. Yes?

A. And I can recall it was

around the two o'clock time that the buzzer for the Ivac had gone off.

17

18

19

20

21

22

23

24

25

Q. Signalling the gentamicin

had gone through, I take it?

A. Yes.

Q. Yes.

A. I can remember Bertha going out to get suction catheters and I can remember her telling me that she told Susan, Susan Nelles, about Allana.



1
2 G9 Q. Yes.
3 A. I can remember Bertha coming
4 back and we put the suction catheters there, and
5 Allana seemed to be a little better than she didn't
6 require the suctioning, and we put her back down in
7 bed and put some oxygen on her.

8 Q. All right. You say you can't
9 tell us just what time that was. Can you tell us
approximately when that was?

10 A. It would have to be around
11 two o'clock. Now whether it was before two or just
12 shortly after two, I can't be sure.

13 Q. All right. Did you then
14 leave the child again?

15 A. No, I don't think we had left
16 her. I had settled her in the oxygen and I was
17 waiting to see if the oxygen would help and if she
would settle down a bit.

18 Q. All right. Now you say Mrs.
19 Bell told you that she told Susan Nelles, who I take
it was in Room 418?

20 A. Yes.

21 Q. ...About this incident when
22 she went out to look for the suction catheters.

23 A. Yes.

24

25



1

G10 2 Q. Did Miss Nelles come into
3 the room at that time?

4

A. I don't think so.

5

Q. All right. Then if I under-
6 stood you, you said you stayed with the child. Did
7 Mrs. Bell also stay?

8

A. She was there, yes.

9

Q. The two of you then stayed
10 with Allana Miller after this episode of the gagging
11 and the thought that you would suction her and then
12 decided you didn't need to do the suctioning?

13

A. Yes.

14

Q. Then what happened?

15

A. Then her chest seemed to fill
16 up a lot more and --

17

Q. What was the interval between
18 settling her down again and the chest filling up
19 again?

20

A. I guess about five minutes.

21

Q. Okay.

22

A. And we sat her up again, and
23 at this time I had put on the intercom in Allana's
24 room that would be heard out in the nursing desk for
25 Dr. Soulioti to come down to the room and to listen to
Allana.



1

G12

A. No.

3

Q. All right.

4

A. It was just shortly after that,

5

I thought within a few minutes she -- I thought Sue
had just finished up with Justin and then put him
down and then came in when she was free.

7

8

Q. You don't recall that you did
anything to summon her to the room?

9

A. No, I can't recall now.

10

11

Q. All right. So Miss Nelles

came in?

12

A. Yes.

13

Q. So far as you knew, I take it,
because she had been told a few minutes earlier that
there was a problem?

15

A. Yes.

16

17

Q. That problem had appeared to
subside and now revived, but this is when Miss Nelles
arrived?

19

A. Yes.

20

Q. All right. And you have used
two expressions to tell us what you did to get Dr.
Soulioti there. First you put on the intercom.

22

A. Yes.

23

Q. Can you communicate via the

24

25



1

G13 2 intercom with the desk?

3 A. Yes.

4 Q. And then you said you did
5 something with a buzzer for Dr. Soulioti to come. Is
6 that something different?

7 A. I may have put on the buzzer
8 for the room. There is a little light outside each
patient's room.

9 Q. Yes.

10 A. I may have put that buzzer,
11 that light on, to let Dr. Soulioti know that is where
we were.

12 Q. Okay. That is just a light,
13 or does it make a noise as well?

14 A. It makes a noise at the
15 desk --

16 Q. Okay.

17 A. -- a beep and then stops for
18 a few seconds and then beeps again.

19 Q. All right. So you look down
the corridor and see which light is on?

20 A. Yes.

21 Q. All right. You may have done
22 that as well?

23 A. Yes.

24

25



1

G14 2 Q. So now we have you and Mrs.
3 Bell still in the room?

4 A. I can't remember if Bertha
5 was there or not or -- Susan was there now.

6 Q. All right. We certainly have
7 you and Miss Nelles there and perhaps Mrs. Bell?

8 A. Perhaps, yes.

9 Q. And a call in for Dr. Soulioti?

10 A. Yes.

11 Q. Then what happened?

12 A. We suctioned -- Susan suctioned
13 Allana Miller.

14 Q. Yes?

15 A. And Dr. Soulioti came into the
16 room, over to the side where Susan was, and Susan
17 was standing by the window side.

18 Q. Yes?

19 A. Dr. Soulioti listened to
20 Allana's chest, had asked for some Lasix for Allana
21 Miller. Susan ran out to get the Lasix and Dr.
22 Soulioti had asked somebody for a chest x-ray to be
23 done stat.

24

25



BmcB.jc

H

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2

Q. Yes.

3

A. And I think that call was going in, Susan came back with the Lasix and the Lasix was given and Dr. Soulioti ran out of the room to phone Dr. Schaffer.

6

7

Q. All right. Do you recall seeing the Lasix drawn up?

8

9

A. I can recall Susan bringing in - I don't recall if it was drawn up or not.

10

11

Q. All right. But your recollection is it was Miss Nelles that went off to get the Lasix?

12

A. Yes.

13

Q. You don't recall whether it was drawn up in the room or before she got back to the room?

15

A. That's right.

16

17

Q. You have no recollection either way on that one?

18

A. No.

19

20

Q. And Dr. Soulioti administered the Lasix?

21

A. Yes.

22

Q. Now, if you look at the chart on page 42, Mrs. Trayner, it appears that where - I am looking about three-quarters of the way down the

23

24

25



H.2

1

2 page - well, let's read the whole note from just under
3 half way:

4

"At approximately 0145 babe's apex
5 was noted to be 54 and very irregular
6 (blood pressure 98 over pulse). Child
7 was stimulated and apex came up to 70.
8 This happened 3-4 times. Then the
9 child began to gag and vomit large
10 amounts of very thick clear mucus. She
11 was suctioned for further amounts of
this mucus."

12

And then the asterisk says that:

13

"Respirations became quite laboured.
14 Substernal and intercostal indrawing
very noticeable."

15

And then:

16

"Dr. Soulioti came to examine child
17 and administered Lasix 6 milligrams
18 IV push at 0240."

19

So, we seem then to have a time for
that event.

21

A. Okay.

22

Q. And do I take it that all you
have been describing to us after the 1:45 episode
occupied the 55 minutes from that time until now,

24

25



H.3

1

2 2:40, when the Lasix was administered?

3 A. Well, yes, I said it had to
4 have been after two.

5 Q. Yes.

6 A. So, it would be the 40 minutes.

7 Q. Incidentally, while we are
8 looking at that nursing note, Mrs. Trayner, it is
9 signed by Susan Nelles. You have told us that to the
10 best of your knowledge Miss Nelles wasn't back in the
11 room until some time after 2 o'clock. Did you provide
12 her with information as to what had happened in the
13 period when she was away from the child?

14 A. Yes.

15 Q. All right. And were of
16 assistance to her in helping her write this final
17 nursing note after the child had died?

18 A. Yes, I gave her my observations.

19 Q. Okay. So, now we've got the
20 Lasix administered by Dr. Soulioti by IV push at 2:40
21 in the morning. The note continues:

22 "At approximately 0245 babe began
23 to seizure, he became very rigid and
24 extended legs and arms."

25 I take it that accurately records the
observations as you recall it?



H. 4

1

A. Yes.

2

Q. Did anything occur between the
administration of the Lasix and this onset of seizure-
like activity?

3

A. No. The only thing I thought
happened was that after the Lasix was given Dr.
Soulioti had run out to call Dr. Schaffer.

4

Q. All right. Is Dr. Soulioti there
when this seizing began?

5

A. I think so, yes.

6

Q. All right. Now, someone listened
and there was no heart rate at all, that could be
heard anyway. Do you know who that was?

7

A. No.

8

Q. Whoever it was said they could
hear no heart rate and so you began CPR?

9

A. Right.

10

Q. Who in fact did that?

11

A. I can't recall.

12

Q. All right. And a Code 25 was
called. At the time that the seizing began you were
in the room?

13

A. Yes.

14

Q. Miss Nelles was in the room?

15

A. Yes.

16

17



H.5

1

2 Q. Anybody else?

3

A. Bertha Bell was back in.

4

Q. Three of you were there. Can
5 you recall anyone else being present?

6

A. Dr. Soulioti.

7

Q. All right. Any other nurse or
nursing assistant?

8

A. No.

9

Q. All right. And a Code was called
10 and the arrest team arrived, resuscitation effort
11 followed and the baby was pronounced dead at 3:27
12 in the morning?

13

A. Right.

14

Q. All right. You said Dr. Soulioti
15 went off to call Dr. Schaffer. Did Dr. Schaffer
arrive at some point?

16

A. Yes.

17

Q. When?

18

A. To the best of my recollection
19 it was just shortly after the 25 had been put in.

20

Q. Was the arrest team already
there when he arrived?

21

A. Yes.

22

Q. And did he participate in the
resuscitation effort?

23

24

25



H.6

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A. Yes.

2

Q. All right. Do you recall any
3 discussion involving Dr. Schaffer after the child had
4 been pronounced dead as to whether Baby Miller's
5 death might be one to be reported to the coroner?

6

A. I remember that one of the
7 doctors, and I don't know him by name, but he came
8 with the arrest team, had said to Michael Schaffer
9 is this going to be a coroner's case as well.

10

Q. Yes.

11

A. And I can remember Michael
12 Schaffer saying no, we know why this baby died.

13

Q. All right. Now, that was the
14 second time that you had heard a reference to a
coroner?

15

A. Yes.

16

Q. At the beginning of the shift
17 you had heard about the coroner's involvement in the
18 Pacsai death and the likelihood of an inquest?

19

A. Yes.

20

Q. Prior to that long night shift
21 of March 20/21, Mrs. Trayner, had you had any
experience at all with deaths that had been reported
22 to the coroner?

23

A. No.

24

25



H.7

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Q. You had never been involved in
a death that led to an inquest?

A. No.

Q. Did you have any idea what was
involved or what was the significance of reporting a
death to the coroner?

A. No.

Q. But now you had heard it twice
in one night?

A. Yes.

Q. Did you ask any questions as to
what that meant?

A. No.

Q. If you look at page 48 of the
chart, please, page 48 and we could have looked at
any of these charts I think to find a similar list
is what is called a "Death Check List". You have
seen this before obviously?

A. Yes.

Q. It is in all sorts of charts. The
nursing component of this chart is in fact completed
by you, is it not?

A. Yes.

Q. All right. This I take it is a
form that has to be completed after a death to be sure



H.8

1

2

3

that all the necessary steps have been taken and
everything that requires to be done has been done?

4

A. Yes.

5

6

7

8

9

10

Q. All right. Now, in this case
Dr. Soulioti completed the physician's part of it and
I point out to you now, although you may not have been
aware of it before, that the second item that the
physician has to check is "Notify coroner if
necessary" and a box for that or a box for if it is
not necessary.

11

A. Yes.

12

13

Q. Do you ever recall seeing that
before on the Death Check List?

14

A. Where are we?

15

Q. I am under the big box "Attending
Staff or House Staff", Item No. 2.

16

A. Yes.

17

Q. "Notify coroner" with a number
"if necessary" and a box for a checkmark there or
"Not necessary" with a box for a checkmark.

20

A. Yes.

21

Q. Do you ever recall having seen
that before in that part of this Death Check List?

22

A. No, but I never really paid too much
concern to this, this was the doctor's part.

24

25



H.9

1

2 Q. Okay, then let's look at the
3 nursing part because Item 4 says:

4 "Notify Medical Records if autopsy
5 granted - pending - refused - and if
6 coroner notified."

7 So, I take it every time you filled
8 in the nursing component on this thing you had to
9 find out if the coroner had been notified, did you not?

10 A. No, I just found out if an
11 autopsy was granted or not granted.

12 Q. You mean you didn't address your
13 mind to that part of this form?

14 A. No.

15 Q. You never asked whether the
16 coroner had been notified?

17 A. No.

18 Q. Did it ever occur to you and
19 wonder what that box was for then if it was something
20 you never inquired about?

21 A. I knew that the coroner had to
22 be called if a child had died in surgery or in the OR.

23 Q. Yes.

24 A. And I knew a coroner would have
25 to be called if the child was less than 24 hours in
the hospital.



H.10

1

2 Q. All right. I take it that page
3 49 of this chart, or what is numbered as page 49,
4 Mrs. Trayner, is the back of the Death Check List,
5 is it?

6 A. Yes.

7 Q. Had you ever read that in your
8 time at the Hospital?

9 A. I probably had, yes.

10 Q. Was it your understanding that
11 if a patient died suddenly and unexpectedly the death
12 might have to be reported to the coroner?

13 A. Yes.

14 Q. In that case did you not have to
15 know in each case when you filled out the nursing
16 part of the Death Check List whether for any reason
17 at all the death had been reported to the coroner?

18 A. No, I never asked.

19 Q. All right.

20 A. And it was never mentioned to us.

21 Q. Okay. And you had no under-
22 standing at all of what might be the consequence of
23 reporting a death to the coroner, or what the
24 significance of it was?

25 A. No.

26 Q. Were you surprised by Allana
27 Miller's death?



H.11

1

2 A. I think I was surprised that
3 she had died that night but she was clinically ill.

4 Q. Yes.

5 A. It wasn't, like, it wasn't a
6 great surprise.

7 Q. Because of what you knew of the
8 child's clinical condition?

9 A. Yes.

10 Q. Do you recall giving evidence
11 at the preliminary hearing, Mrs. Trayner?

12 A. Yes.

13 Q. I am referring now, Mr.

14 (2) Commissioner, to Volume 4 at page 723. You were
15 being asked about Allana Miller and at line 9 you
16 were asked by, I believe Mr. McGee:

17 "What was the reaction of the nurses
18 on the floor, particularly your
19 reaction and Susan Nelles' reaction
20 to the death of this baby?"

21 "A. Well, we were really surprised,
22 very surprised and upset. We both
23 realized Allana Miller was sick."

24 "Q. You did realize she was sick?"

25 "A. Yes."

"Q. But did you expect this kind of



H.12

1

2 "thing to happen?

3 "A. No, we didn't, not that night."

4 Now, fairly, you have said to me today
5 that you didn't expect the child to die that night
6 but that the level of your surprise appears to have
7 been greater as you recounted it at the preliminary
8 inquiry, if I may say so. Do you recall giving that
evidence then?

9 A. Yes.

10 Q. You were really surprised, very
11 surprised and upset?

12 A. Well, as I was trying to explain,
13 we were surprised that Allana had died that night.

14 Q. Yes. But did you not tell me a
15 moment ago that you weren't terribly surprised by the
death, you were a little bit surprised?

16 A. Yes.

17 Q. Well, can you tell me now,
18 because I have to say to you it seems to me there is
19 a difference in your response as between the
preliminary hearing and now, were you really surprised,
21 very surprised and upset, as you said at the
preliminary hearing, or surprised but not too much,
22 as you seem to be saying now?

23 A. My memory would have to be better

24

25



H.13

1

2 for the time of the preliminary hearing, so, what I
3 said then I would have to say is more plausible.

4 Q. And were you indeed very upset
5 that the baby had died?

6 A. I don't recall being very upset;
7 I remember being upset. I don't know what meaning
there is to being, you know, very upset as to upset.

8 Q. I agree, it may be hard to draw
9 gradations, but I tell you, Mrs. Trayner, I am using
10 your language. At page 724 you were asked:

11 "What discussion if any did you have
12 with Susan, do you recall now?

13 "A. Just that we were very upset that
Allana Miller had died."

14 A. Yes. Today I would just say
15 that, yes, we were upset that the baby had died and
16 that it was another death.

17 Q. Just I take it as you would
18 say today that you were surprised but not terribly
19 surprised?

20 A. Yes.

21 Q. And I take it you don't now
22 have any recollection of what it was about the
circumstances of that child's last hours and death
23 that caused you at the preliminary inquiry to say

24

25



H.14

1

2 that you were really surprised, very surprised, very
3 upset, you can't now recall?

4 A. No.

5 Q. It is reasonable to infer I take
6 it you had some basis for characterizing your reaction
7 in that way at that time?

8 A. I may have.

9 Q. Well, you wouldn't have said it
10 if you didn't believe it to be true, I take it?

11 A. I guess so, yes.

12 Q. Following the child's death did
13 you, either during the remainder of the shift or
14 following the end of the shift, have any conversation
15 about the death with any of the other nurses on the
16 floor?

17 A. It would just have been the
18 normal to go down and have a coffee and a cigarette.

19 Q. All right.

20 A. And to just discuss if there was
21 anything, but that would have been the extent of it.

22 -

23

24

25



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I
DMrc 3

Q. You said something a couple of minutes ago that interested me, Mrs. Trayner, when we were talking about degrees of upsetness, and you said clearly you were upset when a child died, it was another death. Had it, by the morning of March 21st occurred to you that there had indeed been a string of deaths during March?

8

A. Yes.

12

A. I think so, yes.

13

Q.. When had you first observed
that March was a month in which an awful lot of
children died?

16

A. I don't know if it was after .
I think it was probably after Inwood, Kristin Inwood,
or the morning when they took Baby Pacsai down to
the Intensive Care Unit.

2

Q. . . Pacsai, as I understand it, was the sixth child to die in March, five we have on the chart, and there was Leith of course who died on March 6th. Do you think it might have been at about March 12th or 13th that it occurred to you that

24

25



1

I2 2 you seemed to be once again in the middle of a string
3 of deaths?

4 A. Yes.

5 Q. Did it occur to you at about
6 the same time that those deaths were occurring in the
7 early hours of the morning? Pacsai of course did
8 not die until ten o'clock in the morning, but he got
into trouble in the middle of the night, did he not?

9 A. Yes.

10 Q. Had that occurred to you at
11 that time?

12 A. I think the children dying at
13 night may have -- I may have thought about it just
14 before that, because I can recall a conversation with
Dr. Michelle --

15 Q. Dr. Heilbut?

16 A. Yes. And that was right after
17 Kristin Inwood had died, or it may have been just
18 before that.

19 Q. Was that the occasion when
20 you asked her about children dying at night?

21 A. Yes.

22 Q. And she talked about things
slowing down at night and so on?

23 A. Yes.

24

25



1

I3 2 Q. Okay. So certainly by that
3 stage you had made the observation, you made it, and
4 it had impressed itself on you to the point where you
5 thought you had better ask about it?

5

A. Yes.

6 Q. And now we have, since the
7 time of Pacsai's death, we have had Inwood, Gardner
8 and Miller, and when you say it was another death,
9 how, as at the morning of March 21st, were you
10 beginning to think about these deaths? Were you
11 beginning to wonder what was causing all these deaths
12 on your floor in that month?

12

A. I don't know -- I wondered
13 why the children were dying, but when we asked the
14 doctors, it was that they were very sick babies.

15

Q. All right. Then let's move
16 on to Cook. Let's see where that goes. You left the
17 Hospital on the Friday morning - I'm sorry, the
18 Saturday morning, Miller having died?

18

A. Yes.

19

Q. You came on duty again that
evening.

20

A. Yes.

21

Q. Now once again let's go through
22 our drill, although I am sure you remember this by now,

23

24

25



Trayner
ex. (Lamek)

1

I4 2 Mrs. Trayner, we probably all do. When your team
3 came on for duty that night, you were the team leader
4 and you had patients in Room 426. Do you recall
5 how many patients you had? I can't read it very
clearly here.

6

A. It is '2', I think.

7

8

THE COMMISSIONER: It looks like '1'
to me.

9

THE WITNESS: Oh.

10

11

MR. LAMEK: Q. I think it is '1'
and the circle is a bit doubled up.

12

A. Okay.

13

14

15

16

17

Q. You had a child in 426, and
we know that Miss Nelles had one child only in 418,
Justin Cook, and that was constant care. Miss
Brownless had four children in 418. Mrs. Christie
had one in 418 and two in 421, and three in 425. Do
you remember that?

18

A. Yes.

19

20

21

22

Q. And as I understand it, when
the team comes on at the beginning of a shift, is it
right that the first thing they do is go and check
their assignments for the night because they are set
during the day, are they not?

23

A. Yes.

24

25



1
I5 Q. And then they go off to get
2 report?
3

4 A. Yes.

5 Q. Now Susan Nelles, you knew
6 and she knew as soon as she came on to the floor and
7 checked the assignments for the night, Susan Nelles
8 and you knew that she was on constant care with Cook?

9 A. Right.

10 Q. I don't think there is anything
11 at all sinister about this, but I am curious. Why,
12 in that circumstance, would she be the one to do the
13 narcotics count and hold the keys?

14 A. I don't know, unless Sui was
15 on constant care.

16 Q. During the day?

17 A. Yes.

18 Q. And Sui was the one that had
19 counted with the girl on days?

20 A. Yes.

21 It was a rule at that time,
22 just a floor rule, that the team leaders that had to
23 give report would not count the narcotics because it
24 was tying up our time, because we would have to give
25 report and then count the drugs, whereas another RN
could do it and it would save a few minutes there.



Trayner
ex. (Lamek)

1

16 2 Q. Okay. The only other RN on
3 your ward that night was Miss Nelles?

4

A. Right.

5

Q. So notwithstanding she had a
6 patient under constant care, she got the task of
7 doing the narcotics count and therefore holding on to
the keys?

8

A. Yes.

9

Q. Did she stay throughout the
10 normal report in the conference room or did she go
off to do that narcotics count with Nurse Scott?

11

A. She would stay with Sui Scott
and get report from Sui.

12

Q. And then would take over from
Sui, having done the narcotics count? She would go
15 and relieve Sui on the constant care of Cook?

16

A. Yes.

17

Q. And I take it they would leave
someone with Cook while they went off to the medications
18 room?

19

A. Yes.

20

Q. What is the first occasion
21 that you recall seeing Justin Cook that night?

22

A. I may have seen him just
before I took report.

24

25



Trayner
ex. (Lamek)

1

I7

2

Q. Yes.

3

4

A. But I remember seeing him
after the report.

5

6

Q. Did you make a special trip
to see him, or was that your first rounds of the ward
that night?

7

8

A. It would have been my first
round going in and seeing him.

9

10

Q. That would have been, what,
about eight o'clock?

11

A. Quarter to eight, eight, yes.

12

13

Q. Do you have any recollection
of how he appeared to you to be at that time?

14

15

A. He was in Susan's arms and he
was a little irritable, that is why she was holding
him.

16

17

Q. Did you talk to her at all
about him at that time?

18

19

A. Just, how is he doing? What
are his vital signs? Was there any problem.

20

21

Q. Mrs. Trayner, we have heard
about Inderal taped to the child's bed.

22

23

A. Yes.

Q. When you were first in his
room that night, did you notice anything of that sort?

24

25



Trayner
ex. (Lamek)

1

I8

2

A. Yes.

3

Q. What did you see?

4

A. I saw two syringes and two vials.

5

Q. Two syringes and two vials?

6

Okay. Where were they?

7

A. Taped to the foot of Justin Cook's bed.

9

Q. Were the vials full or empty?

10

A. They were empty, I can remember that when they were used that night, the syringe was just handed over to the doctor, so the syringes were full.

11

Q. The syringes were full, the vials were empty?

12

A. Yes.

13

Q. And are you saying that, on the basis of your recollection, later, when they were needed, they were merely untaped and handed over, or do you remember when you first saw them that these syringes were full and the vials were empty?

14

A. I can remember about the vials being open and taped and then the syringes beside them.

15

Q. So it was your observation that the vials were empty, the syringes were full, and

16

17



Trayner
ex. (Lamek)

1

I9 2 that is confirmed by what later happened, I take it,
3 that the syringe was just removed and handed to the
4 doctor?

A. Yes.

5 Q. Now, let me be clear in my
6 mind, when you say vials, you are talking about, what,
7 small bottles with a rubber top?

8 A. No. This would be a little
9 glass top.

10 Q. Is that what I call an
11 ampule, then?

A. Okay, yes.

Q. Well, is my usage correct?

A. Yes, you are right then.

Q. It is a little glass thing
15 and you break off the one end of it and put the
16 needle into the thing to draw up the contents?

A. Right.

Q. And can I reserve the word
18 "vial" for a sort of small bottle-like thing with a
19 rubber top through which you stick the needle to draw
20 up the contents?

A. Right.

Q. These were ampules?

A. Right.



1

I10 2 Q. And you recognized them as
3 Inderal ampules?

4 A. Yes.

5 Q. Was there any other identifying
6 mark, label, tag, piece of paper, or anything else
7 that you saw on the bed with those syringes and vials -
I'm sorry, ampules? See, you have me at it now.

8 A. I'm sorry. No. I can't
9 recall anything.

10 Q. Do you know how they got there?

11 A. I was told from Marie Mandal
12 in report that they were, Dr. Jedeikin had said to
have them at the bedside.

13 Q. Do you know who put them at
14 the bedside?

15 A. No, I don't.

16 Q. Did you ever at any time have
17 any information -- what is an ICU grad., by the way?

18 A. An ICU grad.?

19 Q. Yes. Does that expression
mean anything to you?

20 A. It would be a grad. from the
21 Intensive Care Unit.

22 Q. Could it be a graduate nurse
23 in the Intensive Care Unit?

24

25



1

111

A. Yes.

2

Q. Do you have any recollection
of having any information at one time that it was
an ICU grad. who had drawn up Inderal and taped it
to Justin's bed late in the afternoon of Saturday
the 21st?

3

A. No.

4

Q. Do you have any recollection
of giving that information to the Crown Attorneys
or to the Police?

5

A. I can remember they asked me
and I cannot remember saying that it was done by the
girls on the day shift, that they asked me who was on
the day shift and my telling them that it was Sui
Scott and that there was a relief from somewhere. Now,
I don't know if I said it was her that taped it or not.

6

Q. Do you recall being inter-
viewed on November 2, 1981 by the Crown Attorneys?

7

A. Hm-mm.

8

Q. And saying, between 5:00 and
6:00 p.m., someone, I think it was an ICU grad. drew
up some Inderal and taped it to Justin's bed, this is
because he had a severe blue spell and Dr. Jedeikin
ordered Inderal taped to the bedside? Do you remember
saying that to them?

9

10



1

I12 2 A. I remember telling them who
3 was on, and they asked who drew it up and me saying
4 I thought it would have been the ICU grad.

5

Q. Do you recall now the basis
6 for you having thought that? Now that I have reminded
7 you of what you appear to have said in November 1981,
8 does that jog your memory as to what the source of
9 that belief was? You said you thought it was an ICU
10 grad. who had drawn it up and taped it to the bed?

11

A. Yes.

12

Q. Does it assist you now in
13 recalling what it was that made you think that?

14

A. Well, they had said, had told
15 me that Sui Scott hadn't drawn it up, and who else
16 on the floor would have drawn it up. I can recall
17 saying that there was Marie Mandal and the ICU grad.,
18 or the relief person.

19

THE COMMISSIONER: When you said there
20 was an ICU grad., you still haven't quite told us what
21 it does mean.

22

THE WITNESS: I think what it means
23 is that she was a relief from the Intensive Care Unit.

24

MR. LAMEK: Q. Now, if I look at
25 the assignment book for the day shift of March 21st,
26 Mrs. Trayner, Miss Mandal was on and in charge; Miss



I13 1 Partridge was there, Miss Cooney was there; Mrs.
2
3 Scott was relieving there on long days, and on relief
4 was Miss Palmer. Do you know who Miss Palmer was?
5

A. The ICU relief, I knew she
6 was a relief.
7

Q. I have no idea whether she
8 was from the ICU or not. Let me show you the book.
9

THE COMMISSIONER: I'm sorry, I must
10 be looking at the wrong one.
11

MR. LAMEK: Page 179, I think, sir,
12 of the assignment book.
13

THE COMMISSIONER: Yes. I have that.
14
15
16
17
18
19
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21
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25



J
EMT/cr

1

2 MR. LAMEK: Q. We have Miss Mandal
3 in charge. Her regulars are Partridge, Cooney and
4 Scott - Scott is relieving but also relieved Miss
5 Palmer.

6

A. Yes.

7

Q. Do you have any idea who Miss
8 Palmer was? Was she from the ICU?

9

A. She could have been.

10

MR. OLAH: Excuse me, Mr. Lamek. I
think Miss Partridge was ill that day. Her name was
crossed out on the WIN sheet.

11

MR. LAMEK: I said Palmer, did I not?

12

MR. OLAH: Yes, but you had said Miss
13 Partridge.

14

MR. LAMEK: Yes, you are quite right
15 Partridge was ill.

16

Q. She is shown as ill in the
17 morning and crossed off in the afternoon.

18

A. Yes.

19

Q. But Palmer was there relieving
as well as Mrs. Scott.

20

A. Uh-huh. I would have known
21 where Miss Palmer was or who she was when I got the
22 report that Saturday morning then from Lynne
23 Johnstone when she would phone and give me my relief.

24

25



1

2 Q. Yes.

3 A. She would say she had an RN
4 from 7G or ICU or 5G.

5 Q. And if then you told Crown
6 Attorneys in November that you think it was an ICU
7 grad who drew up the Inderal and taped it to Justin
8 Cook's bed, you think you were probably referring to
9 the nurse who was relieving on the floor that day?

10 A. Yes.

11 Q. All right. Was it merely an
12 inference that it was she who had drawn up the
13 Inderal and taped it to the bed or somebody told you
14 that?

15 A. No, it was an inference.

16 Q. All right. In any event what
17 you saw was two empty ampules of Inderal - two
18 empty Inderal ampules and two full syringes?

19 A. Right.

20 Q. And you had been told, you said,
21 by Miss Mandal that those were there on physician's
22 instructions?

23 A. Yes.

24 Q. All right. Having seen Justin
25 Cook as you have told me certainly not later than
about quarter to eight, 8 o'clock, on your first



1

2 round, and you may have seen him even earlier right
3 after report, when did you next see him? When were
4 you next in Room 418?

5

6 A. I thought it was some time
7 around 8:30 in the evening because Susan had asked
8 me to check Justin's IV. She thought it was
9 interstitial or blocked. I thought it to be around
10 8:30.

11

12 Q. All right. Did you do that?
13 You went and checked the IV?

14

15 A. I had asked her was there any
16 blood return and Bertha was in the room then or she
17 was going into the room and I had just - a parent
18 was coming down to talk to me so when I had finished
19 with that parent I went in to Susan and asked her
20 if the intravenous was interstitial or not, and she
21 said no, that Bertha and her had fixed it and it was
22 okay.

23

24 Q. Okay. Just explain to us if
25 you would, please, the significance of the question
was there any blood return?

26

27 A. If there is blood return in
28 the tubing from the IV that means that the needle
29 is in the vein.

30

31 Q. Yes.

32

33

34



1

2

A. And it is okay. If there is no blood return then it is either infiltrated and it is out of the vein and therefore is interstitial and has to be restarted.

3

Q. Miss Nelles and Mrs. Bell appeared to be satisfied that the IV was not interstitial, it was still in place in the vein and you think that was about 8:30?

4

A. Yes.

5

Q. All right. When next did you see Miss Nelles and Justin Cook?

6

A. About 9 o'clock.

7

Q. How did it come about that you saw the child and Miss Nelles then?

8

A. Dr. Costigan had just come onto the floor and had told me to hold my 9 o'clock digs. or the digoxins, and that he would get back to me when to give them out.

9

Q. Okay. We have heard that 9 o'clock is the usual time for administration of the evening digoxin doses. And Costigan was therefore on the floor a little before 9?

10

A. He would have to be because the parent had come down to me had wanted me to give her daughter the digoxin a little early. I guess it would

11

12



1

2 have to be about 8:30 actually, 8:30 then that I
3 spoke to the mum because the mother was going home
4 and she wanted to settle the girl.

5 Q. I take it that any digoxin that
6 was to be administered on 4A that night was going to
7 be administered by you?

8 A. Yes.

9 Q. Because other than Miss Nelles
10 you were the only nurse, registered nurse, on duty?

11 A. Yes.

12 Q. And the RNA's can't administer
13 digoxin?

14 A. No.

15 Q. And Miss Nelles was tied up
16 with one person and couldn't leave him to do
17 medications anywhere else?

18 A. Right.

19 Q. And that patient wasn't on
20 digoxin?

21 A. Yes.

22 Q. So any digoxin to be
23 administered that night was to be done by you. When
24 Dr. Costigan came and told you to hold the 9 o'clock
25 administration did you already have the doses
prepared?



1

A. Yes.

6

2

Q. I take it you seize the
opportunity when it arises to draw up the doses that
you know you are going to have to deliver?

5

A. Yes.

6

Q. Did you have them set out on
a medications tray?

8

A. Yes.

9

Q. And he got there before you
actually did the administration and said don't give
the 9 o'clock digoxins?

11

A. Right.

12

Q. Is that what he said, "Don't
give the 9 o'clock digoxins", or did he say delay
them or hold them or what did he say to you?

15

A. Hold them.

16

Q. Hold them?

17

A. Yes.

18

Q. Did you ask why?

19

A. Yes, and he had told me that
they were checking the concentration of the digoxin
elixir and they were taking it down to the pharmacy
just to check the concentration and that he would
get back to me in 20 minutes or so and let me know
what to do.

24

25



1

2 Q. And that may have been as
3 early as 8:30 or perhaps a little closer to 9
4 o'clock?

5 A. Yes.

6 Q. But in any event before you
7 had administered the 9 o'clock digoxin doses?

8 A. Right.

9 Q. Did he give the same instructions
10 to Mrs. Bell?

11 A. Yes.

12 Q. Did she hold her doses?

13 A. Bertha had already given hers
14 out.

15 Q. Okay. He got to her a little
16 too late?

17 A. Uh-huh.

18 Q. But you delayed giving yours
19 I take it?

20 A. Yes.

21 Q. He came to the floor to give you
22 those instructions?

23 A. Yes.

24 Q. Did he take bottles of the
25 elixir with him when he left?

A. Yes.



1

2

Q. All right. Did he take every
bottle of elixir that you had on 4A with him?

4

A. We only had the one bottle
so that he took the one bottle.

6

Q. And he took that one?

7

A. Yes.

8

Q. What was it about that that
led you to see Justin Cook and Susan Nelles?

9

A. Janet Brownless had come out
into the hallway and she said that Susan Nelles wants
to know what Dr. Costigan had said.

12

Q. All right. So did you go and
tell her?

13

A. Yes.

14

Q. And that I take it was a bit
of an unusual thing that Costigan had done?

16

A. Yes.

17

Q. Had you ever before had digoxin
or any other medication taken off the floor to check
its concentration?

20

A. No.

21

Q. All right. Did you ask Costigan
why that was being done? Why was it necessary to
check the concentration?

23

A. I don't know if I had asked him

24

25



1

2 then. I had asked him if there was a problem with
3 it, and he just said that they just wanted to check
4 out the concentration to make sure what was said on
the bottle was exactly what was inside the bottle.

5

6 Q. And did you repeat to Miss
Nelles everything that had passed between you and
7 Dr. Costigan?

8

9 A. I was on my way in to tell her
and I got half of the story out when Bertha had come
10 in and said "Did you hear about the digoxin?"

11

12 Q. All right. So there were now
three of you in the room?

13

A. Yes.

14

15 Q. All right. Let's start with -
you have told us what your reaction was to the
instructions. Did either Mrs. Bell or Miss Nelles
16 say anything about the instructions that had been
given by Dr. Costigan?

17

18 A. Just that it was strange, that
it was unusual, and there was a comment made that
something big was going on.

19

20 Q. Do you recall who said that?

21

22 A. No, I can't. There was three
of us in the room at the time.

23

24 Q. When the comment was made did

25



1

10 2 anyone react to it, "What do you mean?"

3 A. Susan said something that maybe
4 that is why Baby Pacsai had had a high level.

5 Q. Perhaps the concentration of
6 the digoxin may have been wrong?

7 A. Right.

8 Q. Pacsai died a week before?

9 A. Yes.

10 Q. Did anyone say, "Well, gosh,
11 what about all the other children who had had digoxin
12 out of that bottle since then?"

13 A. No, we didn't.

14 Q. Did that occur to you that
15 other children had probably had digoxin from the
16 same bottle as had been used with Pacsai over on
17 4B?

18 A. It occurred to me, yes.

19 Q. Yes.

20 A. But we hadn't tested anybody
21 for a digoxin level so we had no way of knowing
22 really if the digoxin was high or not high. All
23 we knew about was Pacsai's level.

24 Q. Okay. Any other comment made
25 during that conversation between you and Susan Nelles
and Bertha Bell?



1

2

A. At that time?

3

Q. Yes.

4

5

A. I had asked Bertha what should

I tell my parents.

6

7

Q. You mean the parents of your patients?

8

A. Yes.

9

Q. Yes.

10

11

12

13

A. About holding the digoxin, and we both came up with the solution that we were waiting for some blood results or some lab results for the individual child and that we would get the digoxin out as soon as we could.

14

15

16

17

18

19

Q. All right. Other than the suggestion that maybe that is why the Pacsai level was so high and someone saying something big is going on, how did Miss Nelles and Mrs. Bell appear to you to react to this rather strange, this unusual development of having medication being taken off the floor to have its concentration checked?

20

21

22

A. Bertha was just - she seemed to be a little concerned because she had already given hers out.

23

Q. Yes.

24

A. And she had hoped it was going

25



12

1 to be okay because her children had already had it.

2 Q. Yes.

3 A. Other than that it was just -
4 it was unusual. Nothing like that had ever happened
5 to us on the floor before.

6 Q. And you all agreed it was
7 unusual?

8 A. Yes.

9 Q. Did you all accept the
10 explanation that was given that the material was
11 taken away to check the concentration?

12 A. Yes.

13 Q. Then what happened?

14 A. Dr. Costigan hadn't got back
15 to me yet and we had put a page in for him. He
16 had answered his page by phoning us on the phone and
17 I had asked him what about the digoxin, so this is
18 shortly - this is close to 9, oh, 9:20, 9:30 now.

19 Q. Yes.

20 A. And he said to hold off and
he will be up in a few minutes to let us know what
is happening.

21 Q. And did he in fact come up in
22 a few minutes?

23 A. About 10 minutes, yes.

24

25



1

13 Q. Okay. So we are now at
2 9:30, 9:40, something like that?
3

4 A. Yes.

5 Q. What did he tell you?

6 A. He said that the concentrations
7 were okay. We could go ahead and give out the
8 digoxin. This time have it double-checked and double-
9 signed for and when you are finished with all the
digoxin lock it up.

10 Q. I take it he brought back to
11 you some or the oral elixir?

12 A. Yes.

13 Q. Go ahead and give out the
14 digoxins but this time double-check it - you had
always double-checked digoxin had you not?

15 A. Yes.

16 Q. The dose always had to be
17 checked with another nurse before it was administered?

18 A. Right.

19 Q. Double-signed for it?

20 A. That was the unusual part.

21 Q. That was new?

22 A. Yes.

23 Q. This time the nurse with whom
the dose was checked had to sign?

24

25



1

2 A. Yes.

3 Q. And when you have given out the
4 digoxin, lock it up?

5 A. Lock it up for tonight.

6 Q. All right, lock it up for
7 tonight. So there were two unusual things, were there
not?

8 A. Yes.

9 Q. Double-signing and lock it up?

10 A. Yes.

11 Q. Did it occur to you to wonder
why those instructions were given?

12 A. I asked him why.

13 Q. What did he say?

14 A. He said that there would be a
pink memo coming around tomorrow to explain it all.

15 Q. Were you content to wait until
the next day for an explanation of those strange
instructions?

16 A. Hm-mm.

17 THE COMMISSIONER: Yes, this will be
fine.

18 MR. LAMEK: Is this a good time?

19 THE COMMISSIONER: Yes. Until 2:15.

20 ---Luncheon recess.

21

22

23

24

25



BmcB.jc
AA

1

2 --- Upon resuming at 2:15 p.m.

3 THE COMMISSIONER: Yes, Mr. Lamek.

4 MR. LAMEK: Thank you, sir.

Q. Mrs. Trayner, at some stage
5 someone is going to learn to stop giving me breaks
6 and lunch and things like that because every time
7 they do I think of things I want to go back to.

THE COMMISSIONER: That's an idea.

11 Q. You told me I think that when
12 Dr. Costigan came by at somewhere between 8:30 and
13 9 o'clock on Saturday evening and said that the
14 digoxin, the oral digoxin was being tested for its
15 concentration, you were delayed giving your 9 o'clock
 doses?

16 A. Right.

17 Q. That when you and Miss Nelles
18 and Mrs. Bell were talking about that in Room 418
19 someone suggested, and I don't recall whether you
20 told me who it was, someone suggested that maybe that
21 was the explanation for the Pacsai high level, do
you remember that?

22 A Yes

Q. And I asked you if it occurred



AA.2

1

2 to you that if that were the case then perhaps other
3 children might have had high digoxin levels in the
4 intervening period between Pacsai's death and the
5 21st of March; do you remember?
6

A. Yes.

7

Q. And you said but, you know,
there hadn't been any other digoxin levels recorded?

8

A. Yes.

9

10

Q. Of course, that wasn't quite so,
was it?

11

12

A. No, I didn't mean that we didn't
have digoxin levels recorded, it was digoxin levels
we hadn't heard of other than Pacsai.

13

Q. Well, did you not know that on
the very morning that Pacsai died Kristin Inwood
also on 4B received a dose of digoxin in error that
was intended for Pacsai?

17

A. Right.

18

Q. And indeed that was too large a
dose for that child, was it not?

20

A. I can't remember what the dose
was, really.

21

Q. The problem I believe, as I
understand it, was that Inwood received a dose
intended for Pacsai and it was too large a dose for

24

25



AA. 3

1

2 Inwood. Do you recall learning that at 9 o'clock
3 that morning, some three and a half hours after the
4 dose was administered, that Inwood had a digoxin
5 level of 2.6 on the morning of March 12th?

6 A. No. I can remember asking about,
7 if they were going to do a dig. level and that night
8 when we came back Mary Jean said the dig. level was
fine.

9 Q. I'm sorry, that whose level was
10 high?

11 A. No, the dig. level was fine.

12 Q. Was fine.

13 A. Yes, on Kristin Inwood.

14 Q. But you didn't know what it was?

15 A. No, I didn't.

16 Q. And of course there had been
17 digoxin levels taken on your side of the floor, had
18 there not, Allana Miller had a dig. level on March
19th. Were you aware of that?

19 A. Probably, yes.

20 Q. Yes. And from page 87 of the
21 chart it seems that that level was 0.6?

22 A. Right.

23 Q. But all this didn't occur to you
24 of course on the night of Saturday when you learned
25



AA. 4

1

2 that the dig. was being tested I take it?

3

A. No, I didn't.

4

5 Q. Right. Now, with respect to
Dr. Costigan's instructions which is where we were
I think, and he came back to the floor and he told
you, as you have said, that you go ahead and do the
9 o'clock digs., they were now late of course?

6

A. Yes.

7

8 Q. That they were to be double
checked, which was standard procedure, they were to
be double signed, which was new, and then the dig.
was to be locked up?

9

A. Yes.

10

Q. All right. Did you then go
about and administer the 9 o'clock digoxin doses?

11

A. Yes, I did.

12

Q. All right. Now, that night
since you and Miss Nelles were the only RN's on the
floor I take it you had to do digoxins for Mrs.
Christie's patients and Miss Brownless' patients?

13

A. Right.

14

Q. And there were some digoxins
amongst those obviously because you had drawn them
up and they were prepared?

15

A. Yes.

16

25



AA.5

1

2

3

Q. Did you have those doses checked
by somebody?

4

A. I originally had the doses
checked with Bertha Bell.

5

Q. Yes. At the time that you had
drawn them up?

6

A. At the beginning, yes.

7

Q. Yes. So, you had satisfied
that part of the requirement already by the time
Costigan came back and said you could go ahead and
administer the drug?

8

A. I think what we did was, we
discarded the digoxin.

9

Q. Okay.

10

A. And we started from scratch again.

11

Q. You started from scratch and you
drew up new digoxins, and who checked them this time
with you?

12

A. Bertha.

13

Q. Did she double sign the
medication sheets?

14

A. I remember asking her, I don't
know if she got around to all of them.

15

Q. All right. Well, I can tell
you only this, Mrs. Trayner, that over the course of

16

17



AA.6

1

2 lunchtime I checked charts of other patients who
3 were in 418 and not one of them is double signed for
4 that night. Does that cause you any surprise or
5 concern? I can show them to you if you choose?

6

A. No. Did I sign for them?

7

Q. Well, you signed for them but
there was no double signing.

8

A. Well then, Bertha may not have
signed for them; they were double checked with her.

9

Q. All right. Now, you have told
me that when Dr. Costigan gave you those instructions,
that you can go ahead and administer the 9 o'clock
dose late, he said there would be a memo the next
day explaining these other new instructions?

10

A. Yes.

11

Q. Did you understand that those
instructions were to hold only for Saturday night or
that they were going to be ongoing instructions, the
double signing and the locking up?

12

A. I understood that we had to
lock it up for the Saturday night.

13

Q. Yes.

14

A. That was his instructions, lock
it up for tonight and there would be a memo around
tomorrow. I understood that we had to double sign,

15

16



AA. 7

1

2 double check for it on the Saturday night, I wasn't
3 sure what we were going to do following that night.

4 Q. All right. But as you have
5 told me you were content to wait and see what that
6 memorandum said?

7 A. Right.

8 Q. And you didn't press him for any
explanation?

9 A. No.

10 Q. But the night before you had
11 learned about the Pacsai inquest, had you not?

12 A. Right.

13 Q. And you had been sufficiently
concerned about that, that was at least one of the
14 reasons you were taking the gentamicin into Miss Nelles
15 to satisfy her that you were indeed going to
16 administer what was ordered?

17 A. Yes.

18 Q. Is that fair?

19 A. That's fair.

20 Q. And now on Saturday night there
21 were other very unusual things happening, were there
not, the dose had been delayed?

22 A. Yes.

23 Q. And now it had to be double

24

25



AA. 8

1

2 signed and locked up?

3 A. Right.

4 Q. Now, coming on top of the news
5 that you had received on Friday night and the concerns
6 that that had caused you and the death of Allana
7 Miller the night before, were you not at all concerned
8 to say to Costigan when he came back with these new
9 instructions, look, what is going on? You had never
10 had instructions like that before had you in the
whole time you had been on the floor?

11 A. No. He assured us that we would
12 find out more about it the next day with a pink memo
13 and I understood at that time, that night, to lock it
14 up for the night only. Now, I had also understood
15 that Dr. Costigan had sent out another bottle to
another independent lab to check the concentration.

16 Q. Yes. Did he tell you that?

17 A. Yes.

18 Q. On the occasion of the second
19 visit?

20 A. No. Well, the first time when
he came up and took our bottle of digoxin.

21 Q. Yes.

22 A. That he wanted to test our
23 bottle in our lab and that he would get back.

24

25



AA.9

1

2 Q. Yes.

3

A. So, I understood that they were
still testing it at another lab and we would find out
more tomorrow when the pink memo came around.

4

Q. Okay, let's think about that one
for a moment. First let me be clear as to the sequence.
When Dr. Costigan came before 9 o'clock and took your
bottle of oral elixir --

5

A. Yes.

6

Q. -- you understood it was to be
checked in the Hospital's lab?

7

A. Yes.

8

Q. When did he tell you that he was
sending another bottle out to an independent lab for
checking?

9

A. That it had already gone.

10

Q. When did he tell you that though?

11

A. He told me that at about 8:30
that night.

12

Q. At the same time he took one
bottle for checking internally at the Hospital and
told you that he had already sent another bottle out?

13

A. Yes.

14

Q. Not I take it from your
medications cupboard?

15



AA.10

1

2 A. I understood it to be from 4B.

3

Q. Right. But when he came back to
the floor later and said, all right, you can go ahead
and give out your digoxins, did you not take it from
that that at least the bottle he brought back to you
was of the appropriate concentration?

7

A. Yes.

8

Q. Otherwise he wouldn't have been
telling you to administer doses, would he?

10

A. Right.

11

Q. If then that bottle were of the
appropriate concentration did it occur to you to
wonder why you had to lock it up and why you had to
double sign for it? It wasn't a question of the
concentration any more, was it?

15

A. No. I wondered why it was being
locked up but we were going to find out in the morning.
Dr. Costigan wasn't volunteering any information and
we would find out in the morning.

19

Q. All right. And fairly you
weren't pressing him too hard for information, is
that fair?

21

A. That's fair.

22

Q. All right. Did you discuss those
new instructions that you had received now from

24

25



AA.11

1

2 Dr. Costigan with anyone on the floor?

3 A. I went back to tell Susan Nelles.

4 Q. Yes.

5 A. And she had overheard the
conversation.

6 Q. What was her reaction to the news?

7 A. Just, oh, really.

8 Q. If anything she was less curious
9 than you were?

10 MR. PERCIVAL: Mr. Commissioner, I'm
11 a little confused because we have gone back to the
12 first visit. Are we back to the second one again?
I'm sorry, Mr. Lamek.

13 MR. LAMEK: No, I am talking about the
14 new instructions was the question.

15 MR. PERCIVAL: I am sorry then, I
16 misunderstood.

17 MR. LAMEK: And the new instructions
18 came on the second visit, did they not?

19 THE WITNESS: Yes.

20 MR. LAMEK: Q. The locking up and the
21 signing and the double signing and so on?

22 A. Right.

23 Q. And you went and told Susan
Nelles about those instructions?

24

25



AA.12

1

A. Yes.

2

Q. She had overheard it from 418?

3

A. Yes. Well, we were standing
outside Room 418 and she overheard.

4

(2) Q. And you said her reaction was
"Oh, really"?

5

A. Yes.

6

Q. And I think I asked you whether
to you she appeared to be even less curious than you
were about the matter?

7

A. She had asked me why, did
Dr. Costigan tell us why.

8

Q. Yes.

9

A. And I said, no, we will find out
tomorrow with our little pink memo.

10

Q. All right. And was it then that
she said "Oh, really"?

11

A. Yes.

12

Q. All right. Did you talk to any-
one else about it that night?

13

A. In passing with Bertha.

14

Q. In passing with Bertha. Tell me
how that came about?

15

A. Dr. Costigan had asked me where
the girl in charge of 4B would be, so, I told him and

16

17



AA.13

1

2 then just to make sure that Bertha knew I had asked
3 her if she had spoken with Dr. Costigan.

4

Q. And had she?

5

A. Yes.

6

Q. And was there any discussion
7 between the two of you as to the instructions that
Dr. Costigan had given?

8

A. It was surprising that we were
locking it up but he also told Bertha that we would
find out tomorrow morning what new other arrangements
would be made.

12

Q. Was there any discussion with
anyone else on the floor?

13

A. No, only I recall asking Susan
to lock it up.

15

Q. All right.

16

A. Nothing more than that.

17

Q. Well, let's come to that then.

18

You gave the dig. doses following Dr. Costigan's
go ahead. So far in this night we've had Miss Nelles
I take it in Room 418 constantly with Justin Cook?

20

A. Right.

21

Q. Did she at some point have a break?

22

A. Yes, she did.

23

Q. When did that happen?

24

25



AA.14

1

2 A. Shortly after eleven.

3 Q. Was that after Dr. Costigan had
4 come back with the news that you could do the dig.
5 but with these instructions?

6 A. Yes.

7 Q. All right. I have probably asked
8 you this but could you remind me. Approximately what
9 time did Dr. Costigan come back to the floor with
those instructions?

10 A. I thought it to be about a
11 quarter to ten.

12 THE COMMISSIONER: 9:30 is the note I
13 have.

14 MR. LAMEK: Okay, thank you.

15 Q. Did you immediately thereafter
16 draw up the digs., have them checked and administer
them?

17 A. Yes.

18 Q. So, you finished that by about,
19 what, 10 o'clock?

20 A. I had to wake up the boys, the
older children.

21 Q. Yes.

22 A. So, it took me a little longer.
23 So, about 20 minutes, 25 minutes to get it all out.

24

25



AA.15

1

2 Q. All right. So, by a little after
3 ten you had finished the task?

4 A. Yes.

5 Q. Of giving the digs. out?

6 A. Yes.

7 Q. And you were now to lock up the
dig.?

8 A. Yes.

9 Q. Now, as we know, Susan Nelles
10 had the keys?

11 A. Right.

12 Q. Because she had done the
narcotics count that night with Sui Scott?

13 A. Right.

14 Q. When did you do anything about
15 locking up the digoxin?

16 A. I finished the paperwork that I
had to get done for ten-thirty or a quarter to eleven
17 and when I went in to relieve Susan I had asked her
18 then when she goes out for coffee could she please
19 lock up the digoxin.

20 Q. And what time was that?

21 A. Shortly after 11 o'clock.

22 Q. Why having distributed the digs.
23 by ten or a little after ten, why did you not go and

24

25



AA.16

1

2 get the keys and lock up the dig. as you had been
3 instructed?

4

A. Well, Susan had the keys.

5

Q. Yes, I know.

6

A. And she had a double gown on. It
was awkward to go in and get the keys from Susan. I
knew I had to go in and relieve her within a half an
hour and she could lock it up when she left.

9

Q. And when you say she had a double
gown on, she was wearing her uniform in the normal way,
I take it?

11

A. Yes.

12

Q. And then a sort of a hospital
gown over the top of it?

14

A. Yes.

15

Q. Two gowns over the top of it?

16

A. Yes.

17

Q. Okay. Help me, how did that make
it awkward to get the keys from her?

19

A. Because the gown is tied at the
back and then tied at the waist.

21

Q. Yes.

22

A. And her pockets would be under-
neath that.

23

Q. Were the keys in her pocket or

24

25



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Trayner, ex.
(Lamek)

722

AA.17

1

2 around her neck?

3 A. In her pocket and around her
4 neck, they drag down. But they are on a long string
5 and you can put them around your neck and then they
6 hang in your pocket.

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25



1

2

B
M/cr
Q. Did you at any time prior to
11 o'clock go to her and say, you know, can I
conveniently get the keys from you?

4

A. No, I don't think so.

5

Q. All right. You decided in your
mind that it was not a convenient thing to do, and
therefore you would wait until she had a break?

8

A. Right.

9

10

Q. And that was about an hour after
you finished giving out the dig's?

11

A. Right.

12

Q. From the time you finished
giving out the dig. until you went to relieve Miss
Nelles for a break, were you in Room 418 at all?

13

A. If I had to give digoxin out
in that room I would have been.

16

Q. Yes.

17

A. Other than that --

18

Q. I said from the time you
finished giving out digoxin.

19

A. No.

20

Q. You were not back in Room
418?

22

A. No.

23

Q. You are quite right, obviously you

24

25



1

were in Room 418 to give some digoxin to some of the
other children in that room, or some of the other
children in that room. Where was Justin Cook at that
time?

5

A. He was in Susan's arms.

6

Q. Throughout the time that you
were there?

8

A. Hm-mm.

9

Q. So you went back you say at
about 11 o'clock to relieve her?

11

A. Yes.

12

Q. And she went out to have her
break?

13

A. Yes.

14

Q. For how long?

15

A. About 45 minutes.

16

Q. In fact if that were closer
to an hour would that be approximately right?

18

A. Right.

19

Q. Because you have on other
occasions, have you not, testified that she was out
from about 11 until about 12?

21

A. Right.

22

Q. Do you recall that?

23

A. Hm-mm.

24

25



1

2

Q. May we take it that that is
reliable evidence as to the length of time that she
was out, approximately an hour, from about 11 to
about 12.

5

A. Okay.

6

Q. And you stayed with Justin
Cook for that period of time?

8

A. Yes.

9

Q. Until around midnight?

10

A. Yes.

11

Q. Watching television?

12

A. No, I was settling Justin
Cook.

13

Q. Did you not watch television
at all during that period?

15

A. The T.V. was on, it was right
above me.

17

Q. And that was that famous old
movie, was it?

19

A. Gone With The Wind?

20

Q. That was Gone With The Wind.
All right. Did you leave the child's bedside at all
during that time?

22

A. No, I didn't.

23

Q. And when you relieved Miss Nelles

24

25



1

2 for her break, you asked her to lock up the digoxin?

3 A. Yes, I did.

4 Q. And she came back at about
5 midnight?

6 A. Right.

7 Q. Did she tell you whether she
had locked up the digoxin?

8 A. She told me she had.

9 Q. Did you tell her to lock up
10 all the digoxin?

11 A. Yes.

12 Q. This is asking a lot of you,
13 Mrs. Trayner, but can you now recall what you said
to her?

14 A. I said to her, I have left all
15 the digoxin on the counter, can you lock it all up.

16 Q. And what was the digoxin that
17 you had left on the counter?

18 A. The adult vials, the paediatric
19 vials, the digoxin elixir was also there and some
20 tablets I think that were there.

21 Q. Had you needed all the forms
22 of the digoxin preparations to do the delayed 9:00 p.m.
digoxin?

23 A. No, I just needed the elixir.

24

25



1

2

Q. And what, had you taken the
other forms, the adult and paediatric ampules and
the tablets out of their normal place?

3

A. Yes, they were above the counter
in little spaces.

4

Q. Yes.

5

A. The digoxin is in the cupboard.

6

Q. Yes.

7

A. So I just took everything down
that was there, left it in the centre on the counter
with the elixir there as well.

8

Q. With the expectation that Miss
Nelles would take everything that was there and put
it in a cupboard and lock it up?

9

A. Right.

10

Q. Do you recall some time in
the course of the evening Dr. Costigan coming back
to the floor to count, or take an inventory of the
digoxin that you had?

11

A. Yes.

12

Q. Do you recall what time that
was?

13

A. It was after midnight.

14

Q. After midnight. All right.

15

After Susan had come back from the break saying she

16

17



1

had locked up the digoxin?

2

A. Right.

3

Q. When she came back telling you
that she had locked up the digoxin, what did she do
with the keys?

4

A. She came back around 5 to 12
and handed me the keys and said, I have locked up the
digoxin, I am going down for a paper.

5

Q. Right.

6

A. I will be back in a minute.

7

Q. Okay. From that point on that
night did you have the keys?

8

A. Yes, I did.

9

Q. And they stayed in your
possession throughout the rest of the night?

10

A. Yes.

11

Q. And that was a few minutes
before midnight?

12

A. Yes.

13

Q. And did she come back shortly?

14

A. Yes.

15

Q. After she had gone down for a
newspaper?

16

A. I suppose so.

17

Q. At least that's where you

18

19



1

understood she had gone?

2

A. Yes.

3

Q. Did you then leave the room?

4

A. I checked an Inderal with her.

5

Q. Because Justin Cook had to
receive his Inderal at midnight, did he not?

6

A. Right.

7

Q. Perhaps we should look at the
chart just to remind ourselves about that. The
medication chart is at page 17, and there are two
orders written for Propranolol, or two orders
recording Propranolol.

8

A. Yes.

9

Q. One written on the 20th
apparently calling for 3 milligrams every eight hours;
and on the 21st for 4 milligrams every six hours.
The dose was increased and the frequency was increased,
is that right?

10

A. Hm-mm.

11

Q. And there was a dose due at
midnight, for which Miss Nelles has signed on the
medication sheet. Now what did she have to check
about that Inderal dose?

12

A. We had a - she just -- we have
always checked Inderal on our floor.

13

14

15



1

2 Q. Yes.

3 A. And she had 3 milligrams that
4 was drawn up in a syringe labelled by Sui Scott,
5 Inderal suspension, and Susan had remembered that the
6 Inderal had been increased from 1800 so we needed
7 another cc. We didn't have any extra in our
8 medication cupboard so we broke open a vial of the
parenteral solution.

9 Q. Yes.

10 A. And she drew that up into the
11 syringe and we gave the 3 milligrams plus the extra
1 milligram.

12 Q. Now the 3 milligrams of the
13 oral preparation you say were drawn up into a syringe
14 in the refrigerator?

15 A. Yes.

16 Q. And labelled by Sui Scott?

17 A. Yes.

18 Q. And she had been on during the
day?

19 A. Yes.

20 Q. When you had taken report that
21 night had you been told that that Inderal had been
22 drawn up and placed there by Mrs. Scott?

23 A. I think so, yes.

24

25



1

2 Q. And had you seen it earlier in
3 the course of the evening?

4 A. No.

5 Q. You hadn't? All right. Did
6 Miss Nelles raise any question with you as to whether
7 it was appropriate for her to administer Inderal that
had apparently been drawn up by someone else?

8 A. No, she didn't.

9 Q. Did you have any objection to
10 her doing that?

11 A. I don't think I had, no.

12 Q. You didn't voice any in any
event?

13 A. No.

14 Q. Did she also ask you whether
15 it was appropriate to use the parenteral preparation
16 for the additional 1 milligram that was needed?

17 A. I think the conversation just
went that we can use it, can't we, if it is an emergency
18 we can.

19 Q. You considered it was
20 appropriate in that situation to use it and
21 administer it orally?

22 A. Yes.

23 Q. And that is what she did?

24

25



1

2 A. Yes.

3 Q. In your presence?

4 A. Yes.

5 Q. And did you then leave?

6 A. Yes.

7 Q. Now I am going to ask you about
two visitors to the floor. We have already referred
8 to one of them, and that is Dr. Costigan who came
back to do an inventory of digoxin?

9 A. Yes.

10 Q. The other one I am going to
ask you about is Mrs. Johnstone, the night supervisor.

11 A. Hm-mm.

12 Q. And she was also on the floor
some time after midnight, was she not?

13 A. Yes, she was.

14 Q. Can you remember the sequence
in which those two people came to the floor, Dr.
Costigan and Mrs. Johnstone, which of them came first?

15 A. Dr. Costigan and Dr. Mounstephen.

16 Q. And did they take an inventory
of the digoxin in your medication room, in 4A?

17 A. Yes, they did.

18 Q. And were you with them when
they did that?

19

20



1

2

A. Yes. I had to open up a
narcotic cupboard for them.

4

Q. You now had the keys?

5

A. Yes.

6

Q. You opened the cupboard, and
did you stay while they counted the digoxin?

7

A. Yes, I was in the room.

8

Q. It is an awfully small room,
I know.

10

A. Once you get in you can't get
out until they leave.

11

Q. Was any digoxin on the counter
at that time?

13

A. No, there wasn't.

14

Q. And they took their count and
they left?

16

A. They went over to the crash
cart to check the emergency crash cart.

17

Q. Was there any digoxin there?

18

A. I don't believe so, no.

19

Q. Was digoxin normally kept
on the crash cart on 4A?

21

A. No.

22

Q. Did they go to 4B to carry out
the same exercise, as far as you knew?

24

25



1

A. I think they had counted 4B, when they got to my side they said "Oh good it's locked up". Could I tell 4B to lock their's up. I don't know whether they went back to 4B then at that point or not.

6

Q. How long were they on 4A?

7

A. A few minutes, three minutes.

8

Q. And you were in the medication room letting them into the cupboard, and you were, if you will forgive me, locked in and couldn't get out once you were in that room while they were doing their count?

12

A. Right.

13

Q. Did you take that opportunity to ask again what the reason was for these instructions?

15

A. No, I didn't.

16

Q. Did you raise the subject at all with them?

18

A. No.

19

Q. And then Mrs. Johnstone came to the floor, what time was that to the best of your recollection?

21

A. We called her to come to the floor.

23

Q. And why did you do that?

24

25



1

2 A. Dr. Jedeikin had just come
3 back from being outside of the Hospital.

4 Q. Yes.

5 A. And he wanted to get a
6 medication and he had asked Bertha and I how to go
7 about getting the medication, the medication was
prostoglandin.

8 Q. Did you not have any in your
9 medication cupboard?

10 A. No.

11 Q. All right.

12 A. So we said we would call the
13 supervisor and she will go and get it for you. That's
14 why Lynne Johnstone was on the floor, we called her
15 and told her to come up because Dr. Jedeikin wanted
to get some medication from the pharmacy.

16 Q. Was that visit by Lynne
17 Johnstone to assist Dr. Jedeikin before or after the
18 Costigan inventory taking?

19 A. That was after Doctors Costigan
20 and Mounstephen had counted them and left.

21 Q. And did Mrs. Johnstone then
22 go off to the pharmacy with Dr. Jedeikin?

23 A. She came to the floor and then
24 took Dr. Jedeikin out with her.

25



1

2 Q. And was she back on the floor
3 later to do her rounds as night supervisor?

4 A. I think so, yes.

5 Q. And at that stage do you have
6 any recollection of that visit in her rounds?

7 A. I can remember her saying I
8 will be back for a cup of coffee, that's about all
9 I can -- we went around and we saw all the children,
but I don't know what time that was at.

10 Q. From the time that Susan Nelles
11 came back from her break, went to get her newspaper,
12 went to get the Inderal, administered the Inderal
13 from that time when you left the room until the time
14 that Doctors Jedeikin and Mounstephen came to you
15 to do their inventory were you in the medications
room at all?

16 A. It was Dr. Costigan and Dr.
17 Mounstephen.

18 Q. I am sorry, Dr. Costigan and
19 Dr. Mounstephen?

20 A. No, I don't believe so.

21 Q. But you do recall that when
22 Dr. Costigan and Mounstephen left they were pleased
that all the dig. was locked up?

23 A. Yes.

24

25



1

2 Q. When you went in there to let
3 them into the cupboard with your keys there was no
4 dig. out on the counter?

5 A.

That's right.

6 Q. You see, I am puzzled by that,
7 because we have heard from two people and I can refer
8 you to the evidence; from Susan Nelles herself who
9 said she did not lock up the oral digoxin because
10 she did not understand she was supposed to. We have
11 heard from Mrs. Johnstone who said at the time of her
12 rounds the oral digoxin was still out on the counter.

13

14

15

- - - -

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1
19apr84 2 Obviously I can't ask you to tell me what they saw,
CC
EMTrc 3 but do you have any explanation for those two people
4 saying that not all the dig. was locked up at midnight?

5 A. No, I have no explanation for
6 what they said.

7 Q. And you certainly didn't see
any dig. not locked up after midnight?

8 A. No. It was locked up and it
9 was counted.

10 Q. From the time that Susan
11 Nelles gave the keys to you, nobody could have opened
12 the cupboard to put any other dig. back into it,
13 could they?

14 A. No.

15 Q. Did you just have one bottle
of elixir --

16 A. Yes.

17 Q. -- on the floor?

18 A. Yes.

19 THE COMMISSIONER: In the ward.

20 MR. LAMEK: In the ward, yes.

21 Q. In your medication --

22 A. We had one on 4A.

23 Q. Yes. And that was the one
that Dr. Costigan had brought back and told you that



1

CC2 2 you couldn't do the digs.?

3 A. Right.

4 Q. There had only been one prior
5 to that and he had taken that away at 8:30, quarter
6 to nine, something of that sort?

7 A. Right.

8 THE COMMISSIONER: I take it it was not
9 the same one he brought back, or was it, or do you
know?

10 THE WITNESS: I don't know. He
11 took one bottle and he brought back a bottle.

12 THE COMMISSIONER: Well, the only way
13 you might know is if he brought back a new one and he
had taken away an old one?

14 THE WITNESS: I don't know, I'm
15 sorry.

16 MR. LAMEK: Q. Well, Mrs. Trayner, I
17 guess if Miss Nelles' recollection is right, we may
18 never know what happened to that bottle of digoxin
19 that she left out.

20 Now what time did Miss Johnstone
come to do her rounds?

21 A. One o'clock, 1:30 maybe.

22 Q. That is your best recollection?

23 A. It would have to be after

24

25



1
CC3 2 12:30 because that is when she took Dr. Jedeikin
3 down to the pharmacy.

4 Q. Okay. Somewhere between
5 midnight and 12:30 Costigan and Mounstephen were
6 there doing the inventory?

7 A. Yes.

8 Q. 12:30 Jedeikin was there
9 and Miss Johnstone came and took him down to the
pharmacy?

10 A. Yes.

11 Q. And then sometime after
12 12:30 she came to do her rounds?

13 A. Right.

14 Q. And you went on her rounds
with her?

15 A. Yes.

16 Q. And you were in Room 418 as
17 well as all the other rooms?

18 A. Yes.

19 Q. Do you remember how Justin
20 Cook was at the time you saw him on rounds with Miss
Johnstone?

21 A. At one time he was resting
22 in bed and Susan was just beside him.

23 Q. Yes.

24

25



CC4

1

A. The next time I saw him he
was awake and Susan was holding him.

2

Q. Now you say the next time you
saw him. Was that after Miss Johnstone had been and
gone?

3

A. Yes.

4

Q. Now you were then in Room 418
and in a position to observe Justin Cook at the time
that Miss Johnstone was there making her rounds and
then, once again later, and I take it Miss Nelles
was there on that second occasion?

5

A. Yes.

6

Q. Did you subsequently that
night relieve Miss Nelles for another break?

7

A. Yes, I did.

8

Q. All right. What time was
that?

9

A. It was after two o'clock,
2:15.

10

Q. Is that your best recollection,
2:15?

11

A. It was after -- after two
o'clock because Susan had just done the vital signs on
Justin Cook and he had a little bit of a temperature.

12

Q. And were you working from that

13

14



1
CC5 2 sort of datum point doing the vital signs at two
3 o'clock? You say she had just done the vital signs
4 when you went to relieve her?

5 A. Well, she had completed the
6 two o'clock vital signs for him.

7 Q. And you therefore place the
8 time at about 2:15?

9 A. Yes.

10 Q. Now, Mrs. Trayner, I have
11 this difficulty with it: You have placed the time
12 of that break and your relieving her on different
13 occasions at 2:00 and 2:30, but so far as I know you
14 have not until today said 2:15.

15 A. Well, it is anywhere after
16 two o'clock. I fed him at 2:30 so I had to be in
17 the room for the 2:30 feeding.

18 Q. All right. You had to be in
19 the room for the 2:30 feeding. Do you recall giving
20 evidence at the preliminary hearing?

21 A. Yes.

22 Q. And do you recall saying there,
23 and I can read the passage to you if you like - it is
24 in Volume 4, Mr. Commissioner, at pages 780, 783.
25 783 begining at line 15 you were asked these questions:

26 "Q. Now Susan you indicated took



1
CC6 2 another break at two o'clock or
3 thereabouts?"
4 "A. Yes, she did."
5 "Q. Do you remember the time
6 exactly that was?"
7 "A. That was just before two."
8 "Q. Just before two? What type of
9 a break was that?"
10 "A. It was going to be her dinner
11 break."
12 "Q. Her dinner break?"
13 "A. Yes."
14 "Q. How long is a dinner break
15 normally?"
16 "A. About half an hour to 45
17 minutes."
18 And then at other times in the ensuing pages you
19 say it was two o'clock to 2:40. When asked when
20 exactly that was, you said just before two.
21 Now what is your present recollection
22 as to -- I take it you believed that answer to be
23 true at the time you gave it?
24 A. Yes.
25 Q. Are you suggesting that the
two o'clock vital signs were done before two o'clock?



Trayner
ex. (Lamek)

1

CC7

2 A. No. I believe Susan did them
3 around two o'clock and I relieved her after that,
4 just after her taking the vital signs.

5 Q. And do you believe that that
6 was shortly before two o'clock, as you said at the
7 preliminary hearing?

8 A. To the best of my knowledge
9 I believe it to be after two that I went into the
room.

10 Q. May I take it then that you
11 are telling me now that the answer that you gave at
12 the preliminary hearing when asked if you could
13 remember the time exactly and you said just before
14 two, you no longer believe that answer to be correct?
Is that fair?

15 A. Yes.

16 Q. Now do you recall being
17 interviewed by the Crown Attorneys in November of
18 1981, which would be a couple of months before the
19 beginning of the preliminary hearing? Do you
remember that?

20 A. Yes.

21 Q. Do you recall on that occasion
22 saying to the Crown Attorneys, Mr. McGee in particular,
23 that "I relieved Susan who was with Justin at about

24

25



1

CC8 2 2:30. I wanted her to be back at 3:30."

3

Do you remember saying that?

4

A. No.

5

Q. And if you are reported as
having said that, is it your position you are
misreported? Are you able to tell me that you did
not say that on November 2, 1981?

8

A. No, I can't say that.

9

Q. Is it possible you did say

10 it --

11

A. Yes, it is possible.

12

Q. -- on November 2, 1981?

13

A. Yes.

14

Q. And I take it at the time you
said it you believed that to be true?

15

A. Yes.

16

Q. Excuse me a moment.

17

And on March 25, 1981, do you re-
member being interviewed on that day?

18

A. Oh, yes.

19

Q. I'm sure you do. On that
occasion I think you said it was about two o'clock
that you relieved Miss Nelles. Do you recall that?

20

A. Well, I would have to say
that day then on March 25th my memory would have to

21

22

23

24

25



1

CC9 2

be much better than it is three years later.

3

Q. I suppose so. Could I
equally suggest to you your memory in the spring of
1982 is better than it is in the spring of 1984?

5

A. Yes.

6

Q. Two o'clock sounds right,
does it? 2:00 or shortly thereafter?

7

A. I believe it to be after Susan
had done the two o'clock vital signs because he had
had a temp. I also believe it to be before 2:30
because I remember feeding him, and now it is hard
for me to say that I went in, you know, at 2:00, 2:10,
or 2:22. It was after 2:00 and before 2:30, and
that's the best that I can do.

14

Q. All right. It may be that the
more important question is when did Miss Nelles leave.
Did she leave immediately you went in or was she there
for a few minutes after you went in?

15

A. She was there for a few
minutes with me.

16

Q. All right. Now let's focus
on what happened when you went into the room. Miss
Nelles was there with the child?

22

A. Yes.

23

Q. Was anyone else in the room at

24

25



1

CC10 2 that time?

3

4 Brownless was there at that moment or she came in
just after that.

5

Q. How was the baby?

6

A. He was crying.

7

Q. Yes.

8

A. And he was a little irritable
and he felt warm.

9

Q. May I take it from all that
he was awake?

10

A. Yes.

11

Q. Yes. All right. What was
said between you and Miss Nelles -- well, it's a
long time since I had anything to do with babies
I want you to know.

12

.. What was said between you and Miss
Nelles when you went into that room?

13

A. We had a little conversation
on whether we should feed him now --

14

Q. Yes.

15

A. -- because he was going to
have a clear drink at four o'clock, and should we
give it to him now since he was awake instead of
trying to settle him in our arms and then waking him

16

17



CC11 1 up again at 4:00.

3 Q. Okay. The child was to go
4 in for surgery the next morning, was he not?

5 A. Yes.

6 Q. And the order was therefore
7 that he should have nothing by mouth after four in
the morning?

8 A. Right.

9 Q. And therefore you would want
10 to make sure that he did have something before he
11 was cut off at four o'clock?

12 A. Right.

13 Q. Had you also been told at the
beginning of the shift or at an early stage in the
14 shift that the child should be disturbed as little
15 as possible --

16 A. Yes.

17 Q. -- that night?

18 A. Yes.

19 Q. And was it therefore the
agreement between the two of you that since the child
20 was awake now at some time between 2:00 and 2:30,
21 it made sense to give him his feed or his drink while
22 he was awake rather than put him back down and then
23 have to disturb him later?

24

25



1

CC12 2

A. Yes.

3

4

Q. All right. What were you
going to give to him?

5

A. Sugar water, D5W.

6

Q. D5W. And where was that
kept?

7

A. It was over the little
counter --- on-top over the sink.

9

Q. In Room --

10

A. In Room 418.

11

Q. And did one of you go and
get a bottle of that?

12

A. I had washed my hands and
put my gown on and I was sitting down and Susan
handed me Justin Cook and she went and got the
bottle and warmed it up and then brought it back to me.

16

Q. Okay. Now you say that was
a little conversation that you had, and I think that
was your word. From the time you went in till the
time it was decided that you would feed him now and
Miss Nelles went to get the bottle for you and give
it to you, how long elapsed?

21

A. About five minutes.

22

Q. Right. And then you began
to feed him?

24

25



1

CC13

2

A. Yes.

3

4

Q. And that is the feeding I
take it that is described in the chart as the 2:30
feeding?

5

A. Yes.

6

7

Q. And was that approximately
the time at which you began to feed him?

8

A. Yes.

9

10

Q. Does it therefore follow
that you went into that room on your own evidence
at about 2:25? If you began to feed him at 2:30
following a five-minute conversation which took
place after you went into the room, is it fair to
suggest you went into the room at about 2:25?

11

A. Well --

12

Q. 2:20 perhaps?

13

A. It is fair to suggest, yes.

14

Q. And you wouldn't -- I take
it you are not really in a position to argue with it
because you are not exactly sure when you went in
there?

15

A. No, I am not.

16

Q. And we have really reconstructed
it from your own recollection of what happened once
you got there, have we not?

17

18



1
CC14

2 A. Yes.

3 Q. And you began to feed the
4 child the sugar water?

5 A. Yes.

6 Q. And did Miss Nelles then
leave?

7 A. Yes.

8 Q. She was going off for what I
9 understand is called a lunch break or dinner break
10 or something of that sort and she was going to be
11 away for what, about 45 minutes?

12 A. About a half hour, 45 minutes,
13 yes.

14

15

16

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19

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BmcB.jc

DD

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Q. All right. Now, I remind you again that in November of 1981 when you said to the Crown Attorneys was that she left at 2:30 and you didn't want to see her back until 3:30. Was it an hour break or half hour break, what's your recollection?

A. I thought Susan was back just shortly after 3 o'clock.

Q. For how long did you expect her to be away?

A. Over a half an hour.

Q. Okay. Up to an hour?

A. No, about 45 minutes at the most.

Q. All right. And therefore she left at 2:30, you would expect her back at around 3:15?

A. Right.

Q. All right. And you went ahead with the feeding of Justin Cook?

A. Right.

Q. And that was just a 4-ounce bottle you had, was it not?

A. Yes.

Q. All right. What happened, can you tell us what occurred in the space of time while she was away on her break?

A. Justin drank really the first



DD.2

1

2 half of it and then he had fallen asleep in my arms
3 and then I tried to put him down into the bed and
4 tried to cover him up and he woke up crying.

5 Q. Yes.

6 A. Susan came into the room and
7 over to the bedside where I was and asked what was
8 wrong? I told her that he had fallen asleep drinking
9 and I was trying to settle him but he woke up and we
decided to complete the feeding.

10 Q. I'm sorry, did she then leave
11 or did she stay?

12 A. She just left after I had him
13 in my arms again.

14 Q. All right, thank you.

15 A. And then Justin finished drinking
16 the rest of the water and fell asleep in my arms.

17 Q. And did you then put him back
18 into the crib?

19 A. No, I was afraid he was going to
wake up.

20 Q. All right. So, you continued to
hold him. The last time you tried that he woke up
21 again?

22 A. Yes.

23 Q. All right. So, you continued to

24

25



DD.3

1

2 hold him. Did Miss Nelles come back into the room
3 during her break?

4 A. Yes, she did.

5 Q. How many times?

6 A. She came back that one time.

7 Q. Yes, when the baby cried. Did
she come back again before the end of her break?

8 A. Yes, she came back to see if he
9 was taking the water.

10 Q. And by that time was he still
11 feeding or had he now fallen asleep again?

12 A. He was dozing off.

13 Q. All right. And did she stay in
14 the room that time longer than it took to go and ask
15 the question and receive the answer?

16 A. No, she just came over to see
17 if everything was fine and then left.

18 Q. And then she went back out again
19 to continue her break?

20 A. Yes.

21 Q. And you stayed with the child?

22 A. Yes.

23 Q. Throughout that break from the
24 time that she left at about 2:30 until the time that
25 she came back, and we will try to get to that in a



DD. 4

1

2 moment, did you remain with Justin Cook throughout
3 that period?

4

A. Yes, I did.

5

Q. Right beside him?

6

A. Yes.

7

Q. Indeed, holding him for much of
the time as I understand you?

8

A. Yes.

9

Q. Right. What time did she return
from her break?

11

A. I believe it to be shortly after
3 o'clock.

13

Q. And did you immediately leave?

14

A. I put Justin back into his bed.

15

Q. Yes. Did he settle?

17

A. Yes, he did.

19

Q. All right. And then you left?

21

A. Yes.

23

Q. And you went out to the nursing
station?

25

A. Yes.

27

Q. And into the back of the nursing
station?

29

A. Yes.

31

Q. Who was there when you got there?

33



DD .5

1

2 A. Lynn Johnstone was there,
3 Bertha Bell and when Sue had come in from her break
4 she told me that Lynn was out there and they wanted
5 me to go over the assignments.

6 Q. And for how long did you stay
7 at the nursing station there with Mrs. Johnstone?

8 A. I thought it to be about 20
9 minutes because we were negotiating, Bertha and myself
10 and Lynn Johnstone, about getting relief up.

11 Q. About what?

12 A. Getting relief.

13 Q. Okay, yes.

14 A. Tomorrow.

15 Q. And then what happened?

16 A. And then shortly after 3:30, about
17 25 to 4 I think, Susan called me and when I came to
18 the door Susan says "Does Justin look bluer to you?"
19 As I approached the bedside Bertha Bell was following
20 me along with Lynn Johnstone and Janet Brownless was
21 there and Susan was feeding another baby for Janet
22 Brownless and Janet came in and took the baby away
23 from Susan at that time.

24 Q. All right.

25 A. And we were all at the bedside.

26 Q. Now, you think you were about 20



DD.6

1

2 minutes with Mrs. Johnstone when you heard Susan
3 call out?

4 A. Yes.

5 Q. All right. Now, can we look at
6 the chart for a moment and, in particular at the
7 nursing notes. Page 28 we have Miss Nelles' note
8 half way down the page, from March 21, 7 p.m. until
9 3 a.m.; over the page on page 29, March 22/81 baby
10 settled well after 2:30 feeding, rested comfortably
11 until about 3:45 when hands were noted to be more
cyanosed.

12 Now, was that what it was that
13 apparently caused Miss Nelles to call out because you
14 said she asked you whether he looked bluer to you?

15 A. Right.

16 Q. And that was her first question
17 to you when you went into the room?

18 A. Yes.

19 Q. I take it one can reasonably
20 infer then that the observation of apparently greater
21 cyanosis, which she records as having happened at
22 about 3:45 was what prompted the call to you?

23 A. Yes.

24 Q. All right. Now, if that was at
25 3:45, and I don't hold you I promise you to your



DD.7

1

2 estimate of 20 minutes with Mrs. Johnstone, it may
3 have been 15, it may have been 30 for all I know?

4

A. Yes.

5

Q. But did that assist you in fixing
6 the time a little more closely as to when Miss Nelles
7 returned from her break?

8

A. Well, it was after 3, about 3:15
maybe then.

9

Q. And perhaps you were up to a
10 half an hour with Mrs. Johnstone. It is hard to know
11 exactly how much time passes, I understand?

12

A. Yes.

13

Q. Do you recall however being
14 examined at the preliminary hearing about the time of
15 Miss Nelles' return? At page 788, sir, in Volume 4
16 you were being asked about this second break,
beginning at line 11, sir:

17

"Q. So, he finished the bottle and
then what happened?

18

"A. Then I cuddled him in my arms
for a few minutes, just held him in my
arms and then I put him down on his
back, gave him a soother."

22

And that was a term that was obviously
23 unfamiliar to his Honour:

24

25



DD . 8

1

2

"You gave him what?

3

4

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

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21

22

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24

25

"A. Gave him a soother. I don't know what the other word is for it - pacifier - and put the oxygen hood on him and I sat there until Susan came back in.

"MR. McGEE: What time would that have been?

"A. That was about another 10 to 15 minutes before she actually came in to stay.

"Q. So, that would have been, what, 2:40, 2:45?

"A. Approximately, yes."

Now, as I read that evidence you were putting her return at something like a quarter to three rather than a quarter past three?

A. Hm-mm.

Q. Do I correctly read that evidence and understand what you were saying?

A. Do I mean that that was half way through, because she did come into the room at about a quarter to.

Q. No, I think that refers to her return at the end of the break. Remember, at this



DD.9

1

2 time you thought you would relieve her at about
3 2 o'clock?

4 A. Okay.

5 Q. All right. Do I take it on the
6 way in which we have reconstructed this today that
7 your evidence today that she came back more like 3:15
than 2:45 is the more reliable recollection?

8 A. Okay.

9 MR. STRATHY: Just if I may, Mr.
10 Commissioner. I am looking at the transcript and
11 perhaps it is ambiguous but the answer that Mrs.
12 Trayner gave at the preliminary was:

13 "That was another 10 to 15 minutes
14 before she actually came in to stay.

15 "Q. So, that would have been, what,
16 2:40, 2:45."

17 So, I take it that she actually came
18 in to stay, that is, Miss Nelles, around 2:50 or 2:55
or 3 o'clock, that's how I read that.

(2)

19 MR. LAMEK: Well, no point arguing
20 about it I suppose except, as I said to you earlier,
21 Mrs. Trayner, you thought at the preliminary the
22 break was from 2 to 2:40, you will remember?

23 THE WITNESS: Yes.

24 MR. LAMEK: Q. And therefore approximately

25



DD.10

1

2 2:40/2:45 would seem to indicate the time of
3 Miss Nelles' return as you then remembered it?

4 A. Yes.

5 Q. Is that fair?

6 A. Yes.

7 Q. And as you have considered it
today with me, it seems to have been more likely at
8 about 3:15. Is that fair?

9 A. That's fair.

10 Q. Okay. And indeed just to resolve
11 my friend Mr. Strathy's concern. At page 790 you
12 were asked, line 15:

13 "Q. Now, after you went out of the
14 room what did you do? This would be
around 2:45 I take it in the morning.

15 "A. I just finished telling you I
16 spoke to the supervisor."

17 So, it appears as you then understood
18 it you left the room at 2:45 and today we have
19 considered that anew and it looks more like 3:15, is
20 that fair?

21 A. Yes.

22 Q. A time to which it is now getting
very close.

23 Now, you heard Miss Nelles call out

24

25



DD.11

1

2 and from the chart it would appear that was about
3 3:45?

4 A. Right.

5 Q. And you went in, she said, does
6 Justin look bluer to you?

7 A. Yes.

8 Q. She was holding another baby, a
child, a patient of Miss Brownless?

9 A. Yes.

10 Q. And did you look at Justin Cook?

11 A. Yes.

12 Q. And did he indeed appear to you
to be more cyanosed than when you had left him?

13 A. Yes.

14 Q. And what happened, what did you do?

15 A. We put a call, a Code 23 in for
16 Dr. Kantak.

17 Q. Yes.

18 A. And Dr. Kantak came to the floor.

19 Q. And Miss Brownless I take it
20 took the child that Miss Nelles was holding, took him
21 away so she could deal with Cook?

22 A. Right.

23 Q. All right. And Dr. Kantak came
24 to the floor?

25



DD.12

1

A. Yes.

2

Q. Who else was at Cook's bedside
in the period while you were awaiting Dr. Kantak's
arrival?

3

A. Susan Nelles.

4

Q. Yes.

5

A. Bertha Bell.

6

Q. Yes.

7

A. Myself and Lynn Johnstone.

8

Q. All right. Lynn Johnstone came
in to Room 418 with you, did she?

9

A. Yes.

10

Q. And had Bertha Bell been out at
the back of the nursing station as well?

11

A. Yes.

12

Q. All right. So, there are the
four of you at the bedside and Miss Brownless is
there as well I take it?

13

A. Yes.

14

Q. Do you know where Mrs. Christie
was?

15

A. No.

16

Q. All right. Incidentally, do you
know where Miss Brownless and Mrs. Christie had been
while you were relieving Susan Nelles?

17

18



DD.13

1

2 A. I can recall both of them being
3 in the room.

4 Q. Throughout the time?

5 A. One was, yes.

6 Q. Do you remember which one?

7 A. Janet Brownless was in, she had
8 started doing vital signs and started to feed one
of her babies.

9 Q. Yes.

10 A. And Mrs. Christie had done vital
11 signs on her child there.

12 Q. Okay. But was either of them
13 there throughout the time that you were there on the
break? I'm not quite sure what you are telling me,
14 that one of them was there throughout or that at all
15 times one or the other was there?

16 A. No, I recall both of them being
17 there but I recall Janet Brownless being there more
18 than Mrs. Christie.

19 Q. Okay. Do you know whether she
20 was there, do you recall whether she was there
21 throughout the 45 minutes or whatever it was that you
22 were there?

23 A. I thought she was because there
24 was a movie on TV.

25



DD.14

1

2

Q. Okay.

3

A. And Janet was looking at it.

4

Q. So, it is your belief, it is
your thought that she was there throughout the time
that you were relieving Miss Nelles? I want to be
fair, can you be positive of that? I want you to be
as clear as you can as to how good your recollection is.

5

A. I can't say positively that
Janet was beside me every minute in the room at all
times.

6

Q. Okay.

7

A. I can recall her being there, I
can remember her bringing her cup of tea in.

8

Q. Right.

9

A. And I can remember her sitting
down with the baby for a few minutes watching the TV.

10

Q. Okay.

11

A. Also, I can see her doing vital
signs on another infant in the room.

12

Q. Okay. I take it if you can
remember her bringing her cup of tea in you can
remember before she did that she wasn't there?

13

A. Right.

14

Q. Is that fair?

15

A. Yes.

16

17



DD.15

1

2

Q. So, there was at least that
period when she wasn't there?

4

A. Yes.

5

Q. And there may have been others,
is that fair?

6

A. Okay.

7

Q. Okay.

8

It is now that magic hour, may we take
a short break?

10

THE COMMISSIONER: Yes, all right.

11

--- Short recess.

12

13

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EE
DM/cr

2 ---On resuming.

3 THE COMMISSIONER: Yes, Mr. Lamek.

4 MR. LAMEK: Thank you, Mr. Commissioner.

5 Q. Mrs. Trayner, on the question
6 of the timing of that break about which we have had
7 conversation, may I take it at least that from the
8 time that Miss Nelles came back, whatever time that
9 was, and I know the way we have worked it out today,
10 whatever time that was, you left the room and went
11 to the nursing station and were talking to Mrs.

Johnstone, is that right?

12 A. Yes.

13 Q. And you stayed with Mrs.
14 Johnstone until you heard Miss Nelles call out and
then you went into the room?

15 A. Yes.

16 Q. And from the time you left
17 upon Susan's return, whatever time that was, until
18 the time she called and you went back into the room,
19 do I understand you yourself were not back in Room
20 418?

21 A. No, I wasn't.

22 Q. You were out at the nursing
station with Mrs. Johnstone?

23 A. Yes.



1

2 Q. Now as far as the timing of
3 that break is concerned, I think it proper also
4 to remind you that you prepared some notes with
5 respect to the Cook death, did you not?

6 A. Yes.

7 Q. Do you remember when you
8 prepared those?

9 A. It was the afternoon after
10 the Police Officers had left on March the 25th.

11 Q. On March the 25th. I think
12 fairly on that occasion writing those notes, you
13 said that it was at 2 o'clock that you took your
14 coffee into Room 418 to relieve Sue, do you recall
15 having made that in your notes at that time?

16 A. Yes.

17 Q. I recognize that was a matter
18 of three or four days after the events, and we have
19 really set about the thing working backwards from
20 the 2:30 time today; are you able to tell me whether
21 when you wrote your notes you were relying on your
22 recollection, which I agree was still fresh, or
23 were you working there around sort of mile posts,
24 what I call like the 2:30 feeding, the 3:45 call for
25 help and so on. Were you just trying to place the
time in your mind, or were you also referring to other



1

2 events whose time can be fixed?

3

A. No, I was taking that from what
I remembered on the night.

4

Q. Is it fair therefore to say
5 that notwithstanding that was your first recollection,
6 three or four days after the event, that if we try
7 to time things by reference to known datum points like
8 the 2:30 feeding, and the time of the call for help,
9 when the baby was noticed to be more cyanosed, we
10 come to rather different times for that break as we
11 have today?

12

A. Yes.

13

Q. Now on March the 25th, however,
14 when you did speak to the Police, do you remember
telling them that you went back in to Room 418 at
15 about 3 o'clock to see if Susan Nelles had settled
16 Justin Cook; do you remember that?

17

A. Not really, no.

18

Q. Let me try to direct you to
it.

19

MR. PERCIVAL: 207, page 13 in the
statement.

21

MR. LAMEK: Page 13 in the statement,
thank you. Oh, you are looking at the handwritten
statement; page 9 of the typed version of it, thank

24

25



1

2 you. Do you recall saying:

3

"She went and got the bottle to feed
him and then she left..."

4

We are obviously referring to the second break are
we not:

5

"He took the bottle quite well and fell
asleep half-way through it. Janet came
in to see if I wanted relief."

6

A. Right.

7

Q. Although you yourself were on
relief at the time I think, you were relieving Susan,
is that right?

8

A. Yes.

9

Q. "I went to put him down on the
bed and he cried, Susan came in to see
what was going on and I told her what
had happened..."

10

Which is what you have told us today:

11

"He cried and cried and I picked him
up and I held him in my arms and I gave
him a bottle which he finished. A
couple of the girls came in from 4B just
to look at the kids, Yvonne Lyons and
Susan Reaper..."

12

Now, we haven't mentioned that today. Do you now

13

14

15



1

2 have a recollection of their coming in while you were
5 relieving Miss Nelles?

4 A. Yes.

5 Q. And how long did they stay?

6 A. They were just in for a few
7 minutes.

8 Q. "He was hard to settle for a
few minutes I left the room..."

9 I am sorry:

10 "I had Justin in my arms, Sue came in and
11 we decided to put him back in the bed.
12 He was hard to settle for a few minutes
13 I left the room."

14 Is that your recollection of how that
break of Miss Nelles ended?

15 A. Yes.

16 Q. All right.

17 "She came back and we decided to put
18 him back in the bed. He didn't settle
19 immediately..."

20 And you left. Then you go on:

21 "Mrs. Johnstone the supervisor was up
22 having coffee. I then went back into
23 Room 418, this was about 0300 to see
24 if Sue had Justin settled and she did.

25



7

1

2 the time you left 418 until Miss Nelles called for
3 help. You did leave to go a quick round and look
4 at the children?

5

A. Yes.

6

Q. You didn't go into the room
you say, but you looked from the door to see if she

7 had him settled?

8

A. Yes.

9

Q. Did you speak to Miss Nelles
10 on that occasion?

11

A. Yes.

12

Q. Do you remember what was said?

13

A. Just "So has he settled".

14

Q. All right.

15

A. And I was still walking down
the hall and she was saying "Yes".

16

Q. On the timing as we have put
it together today, Mrs. Trayner, do I understand then
that the probability is that Susan went back to 418
at about 3:15 and you left?

19

A. Yes.

20

Q. You went out and sat with Mrs.
Johnstone for a while?

22

A. Yes.

23

Q. You then left the nursing station,

24

25



1

2 you did a quick tour of your ward, including a stop
3 at the door of 418 and a very brief conversation with
4 Miss Nelles, is that right?

5 A. Yes.

6 Q. You then went back to the back
7 of the nursing station with Mrs. Johnstone and were
8 with her when at about 3:45 Miss Nelles called out?

9 A. Yes.

10 Q. Now, we were at the stage I
11 think where Dr. Kantak had been summonsed, a Code
12 23 for Dr. Kantak?

13 A. Right.

14 Q. And what were you doing in the
15 period before Dr. Kantak arrived?

16 A. I was doing some vital signs
17 on Justin Cook, trying to get the blood pressure and
18 his respirations.

19 Q. In that regard, would you look
20 at page 66 of the chart, and you will see there, Mrs.
21 Trayner, that pulse and respiration were taken at
22 8 o'clock, as also his temperature and blood pressure
23 at 8. Pulse and respiration at 9, 10, at 11; then
24 at 11:50, and then at 1 o'clock. I wonder if you
25 can tell me first if you know why there were
two pulses, two respirations within 10 minutes of



1

9 2 each other there? I am sorry, yes - no, that
3 is the midnight signs isn't it taken 10 minutes
4 early?

5 A. Yes.

6 Q. Thank you. But there are no
7 pulse and respiration at 3 o'clock, it goes 0100,
8 0200, 0345, and we know 0345 was when the child was
beginning to get into trouble?

9 A. Hm-mm.

10 Q. While you were in the room
11 with Justin Cook on that break for Susan Nelles,
12 did you take any vital signs?

13 A. I don't recall that I did,
no.

14 Q. And that might account for the
15 gap at 3 o'clock, might it?

16 A. It may have.

17 Q. I am sorry, so you were trying
18 to take vital signs while you were awaiting the arrival
19 of Dr. Kantak. Are those the vital signs that are
recorded 0345 that you took?

20 A. No, that is not my writing.

21 Q. Could you have taken them and
22 someone else recorded them at your dictation, if you
23 had said pulse 125, could someone have written it down?

24

25



1

2 A. They might have, yes.

3

4 Q. Because 0345 was not the normal
time to record pulse, respiration and blood pressure,
was it?

5

6 A. No.

7

8 Q. But it was the time that the
child was getting into trouble and you were there
looking and deciding to call Dr. Kantak?

9

A. Yes.

10

11 Q. And your recollection is you
were taking some vital signs, do you know what the
others were doing, Bell, Johnstone and Nelles?

12

13 A. Sue was on the side of the
door getting oxygen ready for him.

14

Q. Yes.

15 A. And Lynne Johnstone and Bertha
Bell were just at the foot of the bed.

16

17 Q. At some stage was the crash
cart brought into Room 418?

18

A. Yes.

19

Q. By whom and when?

20

A. I believe it to be from Lynne
Johnstone after Dr. Kantak had arrived.

21

22 Q. Oh, all right. So Dr. Kantak
arrived and what did he do?

23

A. He examined the baby and gave

24

25



1

2 Justin some Inderal that was taped to the bedside,
3 the syringe.

4 Q. He administered Inderal from
one of the syringes that was taped to the bed?

5 A. Yes.

6 Q. And then what?

7 A. Then he asked --

8 Q. If it would be of assistance to
9 you to look at the chart if it refreshes your memory
10 by all means do, I think the note is on page 29.
Starting from the beginning of that note, Mrs. Trayner,
11 it says:

12 "... until about 3:45 when the hands
13 were noted to be more cyanosed and
14 oxygen was increased to one hundred
15 percent. Vital signs were started
16 when the baby began to have a seizure,
17 there was arching of the back and
18 generalized rigidity lasting for 30 to
19 45 seconds."

20 Were you there when that occurred?

21 A. Yes.

22 Q. Does this accurately record
what you observed?

23 A. Yes.

24

25



1

2 Q. "Vital signs at this time
3 were ..."

4 As set out in the flow sheet I believe:

5 "A 23 was placed for Dr. Kantak..."

6 And you have told me about that:

7 "...who arrived a minute or so later..."

8 He came very quickly?

9 A. Yes.

10 Q. "On his arrival propranolol
11 was administered..."

12 And that you have told me was one of the syringes at
13 the foot of the bed?

14 A. Right.

15 Q. Now again by reference to the
16 note if you can, or by recollection if you have a
17 clear recollection, what then occurred?

18 A. I can remember Dr. Kantak
19 asking the two of us, Susan and myself "He looks
20 better doesn't he?". And Susan looking at me and
shaking her head; and Lynne Johnstone saying "No
I don't think he does". And Susan said: "No he looks
worse".

21 Q. What was your impression?

22 A. He didn't look very good after
23 the Inderal, there wasn't much improvement at all.

24

25



1
13 Q. All right.

2 A. I think that was when Lynne
3 Johnstone had gone out and brought in the crash cart
4 to see if they needed any medications from that.
5 He waited for a few more minutes and then he gave
6 another dose of the Inderal. I don't know if it was
7 from the same syringe or the other syringe, but he
8 gave some more Inderal to the baby.

9 Q. Do you recall Dr. Kantak talking
10 by telephone to anyone during that period?

11 A. He phoned Dr. Jedeikin, and
12 I thought he had called Dr. Jedeikin after he gave
13 the second dose of Inderal.

14 Q. You think after the second
15 dose, all right.

16 A. And Dr. Jedeikin informed him
17 to give Justin some morphine and to give him the
18 morphine now and to phone Dr. Jedeikin back in a
19 minute.

20 Q. And was morphine given?

21 A. Yes.

22 Q. Where did the morphine come
23 from?

24 A. I don't know.

25 Q. Do you know who obtained it,



14

1 who brought it?

2

3 A. It was I think Lynne Johnstone
4 or Bertha Bell, I don't remember.

5

6 Q. You are sure it wasn't yourself?

7

8 A. No, I was at the side of the
9 bed at the time.

10

11 Q. And where was Miss Nelles?

12

13 A. She was on the other side.

14

15 Q. So one of the others must have
16 obtained morphine from somewhere?

17

18 A. Yes.

19

20 Q. And that was administered by
21 Dr. Kantak?

22

23 A. Yes.

24

25 Q. And then what happened?

26

27 A. He didn't look, Justin didn't
28 look any better after the morphine and during this
29 time Lynne had said I think we had better call ICU,
30 the Intensive Care Unit to get the baby down to the
31 Intensive Care Unit. Dr. Kantak said that no, he would
32 be fine and that he would call Dr. Jedeikin back,
33 or Dr. Jedeikin would be coming in. I can recall
34 Lynne Johnstone being very agitated by saying:
35 "Look, someone has to take charge here. I am going
36 to call the ICU." I remember her leaving the room

37

38



1

15 2 to go and use the phone and within a second she was
3 back saying Dr. Jedeikin is running up the hall.

4

5

6

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1

19apr84 2 Q. All right. Did he then
FF
EMTrc 3 come into the room?

4

A. Yes, he did.

5

Q. And what happened when he
arrived?

6

A. He did a quick examination
of the baby. He asked Susan what had happened; asked
Dr. Kantak what the results were from the Inderal
and from the morphine, and made arrangements for the
baby to be taken down to Intensive Care Unit.

11

Q. Did he himself speak to the
Intensive Care Unit by telephone?

12

A. Yes.

13

Q. All right.

14

A. And at that time he had
called for a -- I thought he had called for an
anaesthetist because they were planning on intubating
Justin Cook on the floor and then taking him down
to the Intensive Care Unit.

19

Q. Yes. Did an anaesthetist
arrive?

20

A. Pardon me?

21

Q. Did an anaesthetist arrive?

22

A. I can recall the anaesthetist
coming.

24

25



FF2

1

Q. Yes.

3

A. And just got to the -- to my side of the bed when Dr. Jedeikin said "What is his heart rate doing?" because he, Dr. Jedeikin, was beside Susan and the cardiac monitor was beside me.

7

Q. Yes.

8

A. He could see the monitor, I couldn't.

10

Q. Yes.

11

A. And I listened with my stethoscope and I said, "I can't hear anything", and Dr. Jedeikin started CPR on the baby.

13

Q. All right. Was the monitor showing any heart beat?

15

A. My back was to the back of it and I really can't see what it was showing.

17

Q. So Dr. Jedeikin started CPR?

18

A. Yes.

19

Q. And was a Code called at that time?

20

A. Yes.

21

Q. And the arrest team arrived and resuscitation effort ensued?

23

A. Yes.

24

25



1

FF3

2

Q. And as we know Justin Cook
died at 4:56 in the morning.

4

A. Yes.

5

Q. Following the child's having
been pronounced dead, what did you do?

6

A. What did I do?

7

Q. Yes. What did you do?

8

A. I think I went out to the
desk.

10

Q. Yes.

11

A. I don't know what I did the
exact minute there.

12

Q. Did you leave the others in
Room 418?

14

A. I guess -- I don't know.

15

Q. All right.

16

A. I may have walked out with
Bertha and gone in and got some water.

18

Q. And we know from Miss Johnstone
that she left before the child was pronounced dead.
Do you recall that?

20

A. I don't recall when she left.

21

Q. All right.

22

A. I know she did leave.

23

Q. She did leave and you recall

24

25



Trayner
ex. (Lamek)

1

FF4 2 that Miss Coulson was there?

3 A. Yes.

4 Q. All right. When you left
5 the room, do you recall whether Miss Nelles stayed
6 in the room?

7 A. Yes, she did.

8 Q. And Miss Coulson?

9 A. I can't remember Kathy Coulson,
10 no.

11 Q. All right. What about the
12 physicians? Was Kantak there throughout the
13 resuscitation effort?

14 A. I thought Dr. Kantak had
15 left the room.

16 Q. All right.

17 A. And Dr. Jedeikin had left and
18 was on the phone with Dr. Fowler.

19 Q. All right. That was after the
20 child had died?

21 A. Yes.

22 Q. All right. And the arrest
23 team left, I take it?

24 A. Yes.

25 Q. What is the normal procedure
following a resuscitation effort? We know it wasn't



1

FF5 2 followed that night, but what did you normally do
3 after a resuscitation effort after the child had
4 died? What was the drill?

5

A. There would be a clean-up --
well, not committee, but people would pitch in and
clean up the room --

7

Q. All right.

8

A. -- straighten things around.

9

Someone would bathe the baby and prepare the baby for

10 the parents if they were coming in.

11

Q. Right.

12

A. And then the nurse that was
with the baby would prepare the notes.

13

Q. Okay. Now I take it that
there was normally a few minutes pause while every-
body gets over the upset of the resuscitation effort
having failed and so on, and then what you have
described begins to take place, does it?

14

A. Right.

15

Q. Now it didn't take place
19 that morning, did it?

20

A. No, it didn't.

21

Q. What happened?

22

A. Dr. Jedeikin was on the
23 phone with Dr. Fowler and the clean-up had started, I

24

25



1

FF6 2 think. Janet Brownless had come in and was picking
3 up stuff and starting to put them into the green
4 garbage bags that we have, and Dr. Jedeikin came in
5 and said, "Leave everything alone. Leave everything
as it is."

6

Q. Where were you at that time?

7

A. I think I was either going
8 into the room just ahead of Dr. Jedeikin or just
9 after him.

10

Q. All right. Had Dr. Jedeikin
11 made his telephone call from the nursing station?

12

A. Yes.

13

Q. And had you been at the
nursing station at the time?

14

A. Yes.

15

Q. Was it Dr. Fowler that he had
16 called?

17

A. I believe it to be, yes.

18

Q. I don't suggest for a moment
you were eavesdropping but did you hear what he said
19 to Dr. Fowler?

20

A. The cardiologists are called
21 during the arrest attempt and then they are called
22 after. I knew he had called Dr. Fowler during the --
23 Justin's arrest.

24

25



1

F F7 2 Q. Yes.

3 A. And I assumed it to be Dr.

4 Fowler that he called after to say it was unsuccess-
5 ful.

6 Q. Was that all you heard him
7 say, or did you hear him say anything?

8 A. I didn't really hear anything.
I just knew that he was talking to somebody.

9 Q. Okay. And then Jedeikin went
10 back into 418 and you were there at about the same
11 time that he went into the room and he told them
12 to stop the clean-up and to leave everything as it
13 was?

14 A. Yes.

15 Q. All right. Did the nurses
then leave the room?

16 A. I think they did. I can
recall Bertha and myself sitting at the front of
17 the nursing desk and Susan behind the nursing desk
18 writing up the notes.

19 Q. Did Dr. Jedeikin go into
20 Room 418 when the others left?

21 A. Yes, he did.

22 Q. Do you know what he was doing
23 in there?

24

25



Trayner
ex. (Lamek)

1

FF8 2 A. He was in there for a minute
3 and then he came back out to talk to Susan and I
4 could hear him saying, "Let's sit down and can you
5 tell me what had happened?"

6

Q. Yes.

7

A. And that took I thought about
probably close to ten minutes.

8

Q. Yes.

9

A. That they were discussing.

10

By that time Dr. Fowler was on the floor.

11

Q. Did Dr. Jedeikin say anything
to you about Justin Cook or his death or anything at
all that you can now remember?

12

A. He came up to me when I was
at the back of the nursing desk and this was after he
had spoken to Susan and he said that, "I have just
spoken to Susan and I just told her the same thing
I am going to tell you, that nothing you had done
caused Justin to die. He received excellent care. I
told Susan and I just want you to know as well."

13

Q. Okay. Now you say by this
time Dr. Fowler was on the floor?

21

A. Yes.

22

Q. Was that an unusual thing for
a staff cardiologist to arrive following an arrest?

24

25



1

FF9

A. Yes, it was.

2

Q. What happened then?

3

A. Then I can remember Janet

4

Brownless coming out and asking me for some syringes
for Dr. Jedeikin.

5

6

7

8

9

10

11

12

13

14

15

16

17

18

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20

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—



1
/rc
FF2.1

2 Q. Coming out of where?

3 A. Out of 418.

4 Q. Was Dr. Jedeikin back in
5 418 at that time?

6 A. Both Dr. Jedeikin and Dr.
Fowler went into Room 418 by themselves.

7 Q. And was Janet Brownless in
8 there with them?

9 A. She went in after Dr. Jedeikin
10 and Dr. Fowler.

11 Q. She came out and asked you
12 for some syringes?

13 A. Yes.

14 Q. Did you understand that to be
a request of Dr. Jedeikin or Dr. Fowler?

15 A. She just said Dr. Jedeikin
16 wants some syringes.

17 Q. Did she tell you how many
18 syringes or what size he wanted?

19 A. She probably did, but I can't
remember now.

20 Q. That is something you would
21 need to know, I take it?

22 A. Yes.

23 Q. Did you know what he wanted

24
25



Trayner
ex. (Lamek)

1

FF2.2 2 them for?

3 A. No.

4 Q. All right. You obtained
5 the syringes and you gave them, what, to Miss
6 Brownless or did you take them into the room yourself?

7 A. I gave them to Janet.

8 Q. All right. And she took them
into Room 418?

9 A. Yes.

10 Q. Did you subsequently learn
11 what the syringes had been required for?

12 A. When I had gone in, Dr.
13 Jedeikin was taking samples. He had already had
14 some -- there were syringes in the room before and
he was taking some samples from the IV tubing.

15 Q. Okay. Did you take the
16 syringes into the room to give to Janet Brownless?

17 A. No. I gave them to Janet
18 Brownless.

19 Q. Outside the room?

20 A. Yes. At the clean utility
room.

21 Q. Right.

22 A. I got them for her.

23 Q. She took them into Room 418.

24

25



1

FF2.3 2 At what stage and for what purpose did you go into
3 Room 418 and see Dr. Jedeikin taking samples?

4

A. I went in just shortly after
5 that to see what they wanted the syringes for.

6

Q. Yes.

7

A. I had asked Janet and she
8 said, I don't know. They just asked me to get them.

9

Q. So you went in to find out,
and what did you see?

10

A. That Dr. Jedeikin was taking
11 some samples from the IV bags and the tubing. They
12 were already in the green garbage bags.

13

Q. The tubing was in the green
garbage bag?

14

A. Yes.

15

Q. All right. Did you see him
16 taking any blood samples from the body of Justin
17 Cook?

18

A. No. I can't remember that
today.

19

Q. All right. Did you at some
20 stage learn that he had taken blood from the body of
21 Justin Cook?

22

A. I recall that he wanted some
23 needles, intercardiac needles.

24

25



1

FF2.4

Q. All right.

3

4

A. That I had to get, and it
was to take blood, but today I can't -- I can't
recall being there or knowing that he took it.

5

Q. But it was your understanding
he was drawing blood from Justin Cook?

7

A. Mm-hmm.

8

Q. Was that an unusual thing?

9

A. Yes.

10

Q. Did it cause you any concern
or worry that blood was being taken from Justin Cook
after his death?

12

A. I can't remember him taking
the blood, but I was concerned that all this was
happening and we didn't know why.

15

Q. All right. Did Dr. Fowler
stay in Room 418 with Dr. Jedeikin and the body of
Justin Cook?

18

A. Yes.

19

Q. Did he at some stage come out
to the nursing station?

20

A. I can remember him walking
around the nursing station.

22

Q. Do you remember whether he
or Dr. Jedeikin made any further telephone calls that

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FF2.52 morning?

3 A. He made a phone call at the
4 back of the nursing --

5 Q. I'm sorry, who is "he"?

6 A. Dr. Fowler.

7 Q. Dr. Fowler, yes, he made a
call at the back of the nursing station?

8 A. Yes.

9 Q. Do you know to whom?

10 A. It was to a biochemist. I
11 don't know his name.

12 Q. One of the Hospital bio-
13 chemists?

14 A. Yes.

15 Q. That at least is what you
understood?

16 A. Yes.

17 Q. And were you able to hear any
18 of the conversation - I am not suggesting you were
19 trying to, but did you hear any of the conversation?

20 A. Yes.

21 Q. What did you hear Dr. Fowler
say?

22 A. That he wanted this bio-
23 chemist down at the Hospital now.

24

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FF2.6 2 Q. Approximately what time was
3 that?

4

A. 5:30, quarter to six.

5

Q. Dr. Fowler was calling a
6 biochemist to come to the Hospital between 5:30 and
7 six o'clock on a Sunday morning?

8

A. Right.

9

Q. Was that unusual as far as
you knew?

10

A. They don't work on Sundays,
11 yes.

12

Q. I take it the answer is, yes,
that was a bit unusual?

13

A. Yes.

14

Q. Well, at that stage if I may
say so, Mrs. Trayner, had there not been a whole
15 series of unusual events on the floor that shift?

16

A. Yes, there was.

17

Q. You had started out with a
delay in administration of the nine o'clock dig.
18 doses?

19

A. Yes.

20

Q. And that itself was unusual.
They were checking the concentration of the material
21 they told you?

22

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Trayner
ex. (Lamek)

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FF2.7 2 A. Right.

3 Q. Then there was the order that
4 came down via Dr. Costigan that dig. was to be not
5 only double-checked as always but now double-signed
6 and locked up, and that was unusual?

7 A. Right.

8 Q. And then we find a staff
9 cardiologist, senior staff cardiologist on the
10 floor following an unsuccessful arrest, and that was
unusual you have told us?

11 A. Right.

12 Q. And then there was the
13 drawing of post mortem blood from Cook, and that was
unusual?

14 A. Right.

15 Q. And last of all we have
16 Fowler on the telephone at 5:30, six o'clock in the
17 morning, saying to a biochemist, "Get here now"?

18 A. Yes.

19 Q. And that was unusual?

20 A. Yes.

21 Q. What was your reaction to
that series of very strange events that night?

22 A. I can recall asking Dr.
Jedeikin what was going on.

23

24

25



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FF2.8 2 Q. Yes.

3 A. And he, it was like he was
4 pacifying me. He tapped me on the shoulder and
5 said, "Nothing. Everything was fine."

6 Q. Clearly you did not believe
7 that?

8 A. No. What he was saying and
what he was doing were contradicting each other.

9 Q. Yes.

10 A. It was a little odd.

11 Q. I take it it was clear to
you that something was going on?

12 A. Yes.

13 Q. And it was something of a
14 kind that you had never encountered before in the
15 Hospital, was it not?

16 A. Right.

17 Q. Did anything occur to you
as an explanation for what was happening?

18 A. I didn't have any explanation.
I wondered, but I couldn't come up with any reason
20 as to what was going on.

21 Q. Nothing at all occurred to you
22 as a possible explanation for all of that?

23 A. No.

24

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F2.9 2 Q. Did you talk to any of the
3 other nurses on the floor about those events any time
4 from 5:30, 5:45, six o'clock, the rest of the shift?

5 A. I spoke with Bertha Bell.

6 Q. All right. When did you

do that?

7 A. It was after, we were sitting

8 at the desk when we heard Dr. Fowler calling the

9 biochemist.

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Trayner, ex.
(Lamek)

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BB/ko 2 Q. All right. That was the last
3 of the unusual events that had occurred that night.
4 What did you say to Bertha Bell?

5 A. Bertha asked me what was going
on.

6 Q. And you said?

7 A. I don't know.

8 Q. Did she have any idea, any
9 thoughts, any speculation, did anything occur to her?

10 A. No, she was crying, she seemed
11 to be quite upset and just saying something is going
12 on, what's going on.

13 Q. Now, you spoke to your opposite
14 number on 4B. Did you have any conversation with the
15 members of your own team about all these events and
what they could possibly mean?

16 A. Janet Brownless came to me and
17 asked me what was going on.

18 Q. Again in the last hour or so of
the shift?

19 A. Yes.

20 Q. Yes. And you were able to tell
21 her nothing I take it?

22 A. Right.

23 Q. Any conversation with Miss Nelles?

24

25



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2

GG 2 A. I can't specifically remember
Sue. She was busy during this time, she was writing
the note, she was with Dr. Jedeikin in the room at one
time and then she was preparing Justin's body and I
can't specifically remember sitting down and talking
to her or saying anything to her.

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Q. And other than the question that
you asked of Dr. Jedeikin who gave you that soothing
but not very satisfactory answer, do you recall
speaking to any other physician that morning about what
this all meant, what was going on on your ward?

A. No. Dr. Fowler was very busy,
so, I couldn't get him, but it was Dr. Jedeikin I spoke
to.

Q. Do you remember that Mrs.

Johnstone came back to the ward towards the end of the
shift?

A. I don't recall that, no.

Q. You don't recall seeing her?

A. No.

Q. You don't recall any conversation
with her?

A. No, I don't.

Q. All right. Mrs. Johnstone has
given evidence here that she was indeed back at about



1

3 6 o'clock in the morning and that she spoke to you.
4 I take it you have no recollection either to confirm
5 or to deny her evidence on that score?

6 A. No, I don't.

7 Q. All right. Of all the events
8 that occurred that night and the one that I have not
9 mentioned of course is the death of Justin Cook
10 itself, was there any one that bothered you more than
11 any other or was it the entirety of the events that
12 was bothering you? Were you upset particularly by
13 any one thing?

14 A. Just the whole evening, all the
15 events that had happened that evening.

16 Q. Did you feel any particular
17 concern or puzzlement about the taking of the post
18 mortem blood from Justin Cook?

19 A. Today I can't recall that.

20 Q. You don't recall having any
21 particular reaction to that as opposed to any of the
22 other events of the night?

23 A. No.

24 Q. All right. I take it, therefore,
25 that if I were to read to you the evidence of
 Mrs. Johnstone and Mrs. Radojewski as to the impression
 that they had of your reaction of the taking of blood



GG 4

1
2 you don't have a recollection that could be of any
3 assistance to us either as to whether you had that
4 reaction or as to whether you did anything that could
5 have given them that impression. You can't help us
6 on that, can you?

7 A. No, just that I was asking
questions of Dr. Jedeikin.

8 Q. Yes?

9 A. And the whole night was very
10 unusual to me and I may have come across as being that
11 way but I can't remember now how I was.

12 Q. You have no recollection of
13 feeling particularly agitated about that one incident
more than any other?

14 A. No.

15 Q. The drawing of blood?

16 A. No.

17 Q. All right. When you left the
18 floor that morning, the end of your shift, did you
immediately leave the hospital and go home?

19 A. I spoke to Liz Radojewski before
leaving the floor, she came on the floor.

20 Q. Yes?

21 A. And we had a conversation in
the dirty utility room and it was suggested that we

22

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GG 5

1 go down for a cup of coffee before we leave.

2 Q. Now, that was a Sunday morning,
3 was it not?

4 A. Right.

5 Q. And Mrs. Radojewski came in that
6 morning?

7 A. She was the supervisor on call
8 for the weekend.

9 Q. Okay. And you told her of the
10 events of the night?

11 A. Yes.

12 Q. All right. You say there was a
13 discussion in the dirty utility room?

14 A. Yes.

15 Q. And what was that discussion and
16 who was present?

17 A. Liz, myself, Janet Brownless,
Sue Nelles was there, Bertha.

18 Q. I'm sorry, and Bertha?

19 A. Bertha Bell.

20 Q. Yes. Do you recall anybody else?

21 A. No.

22 Q. Do you recall what was said in
the course of that discussion, how long did it last?

23 A. I think it took about 10 minutes.

24

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GG 6

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2 Q. Did you all happen to be there at
3 the same time? How does a discussion like that come
4 about in the dirty utility room? I mean, did you just
5 happen to be there all at the same time or did someone
say let's go and have a chat about this or what?

6

7 A. I don't know how we ended up there,
it is right outside of 418.

8

Q. Yes.

9

A. And I don't know.

10

11 Q. All right. But one way or
another you all found yourselves in the dirty utility
12 room; for about 10 minutes you say?

13

A. Right.

14

Q. What's your best recollection of
the discussion?

15

16 A. I can recall telling Liz what had
happened, the events of the night. I started with the
17 digoxin being locked up, I explained to her that
Dr. Costigan and Dr. Mounstephen had come around and
said to lock it up, it has to be double signed for now
18 and that their pink memo will be around in the morning,
or this morning, I had told her about the events of
19 Justin Cook, I told her that Dr. Fowler was on the
20 floor and I think basically that was it.

21

Q. Okay. You said all of this in the

22

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2 presence of all the other people you have identified as
3 being there?

4 A. Yes.

5 Q. I take it from that you were doing
6 the main narration to Mrs. Radojewski?

7 A. Well, I had given Liz my report as
8 to what was going on and then I had to leave and give
report to the girls.

9 Q. The day shift?

10 A. The day shift.

11 Q. Yes?

12 A. And Marie Mandal was there in
13 the utility room as well I think but then left shortly
14 after that so we could finish up report on the other
children.

15 Q. And what was Mrs. Radojewski's
16 reaction to all of this information?

17 A. She said that we wouldn't lock up
18 the digoxin because she would wait for a pink memo to
19 come around, but she was joking.

20 Q. All right.

21 A. She said we get it out all the
time and was going to wait for the pink memo.

22 Q. In fact, it was already locked up,
23 as we have heard?

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G 8

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A. Yes.

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Q. Other than that, did she have any reaction to the other events that you described to her?

5

A. She was surprised about Justin Cook's death.

6

7

Q. Was she also surprised about the drawing of blood from his body post mortem?

8

A. I can't remember that.

9

10

Q. Do you remember anything said by anybody else in the course of that few minutes discussion?

11

A. Just that we would meet downstairs for a cup of coffee.

12

Q. All right. And did you do that?

13

A. Yes.

14

Q. Who went?

15

A. Susan Nelles, myself and Liz Radojewski.

16

Q. And for how long did you sit having coffee?

17

A. It was about 20 minutes, half an hour, we were both very tired.

18

Q. Did you talk about the events of the night?

19

A. I don't think so.

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Q. Do you recall any discussion

between the three of you as to what these events could mean?

A. The only conversation I remember is Liz asking Susan did she write down everything about Baby Pacsai, did she write her notes and Susan saying yes and then we talked about the weather.

Q. Okay.

Mr. Commissioner, I think I have come to the end of the questions that I have about Justin Cook. Clearly I am not finished in entirety my examination. Do you want me to start on a new topic now or shall we come back after the long weekend with that?

THE COMMISSIONER: No, there are several dirty looks in the audience if I were to do that, so, we will rise I guess until 10 o'clock. Can you give us some indication though how long you will be?

MR. LAMEK: I shall finish up Tuesday morning.

THE COMMISSIONER: You mean before 1 o'clock?

MR. LAMEK: I mean on Tuesday morning.

THE COMMISSIONER: Well, that's all the

